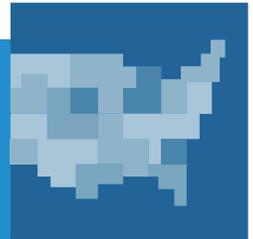


REPORT



November 2015

Medicaid Home and Community-Based Services Programs:

2012 DATA UPDATE

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The Kaiser Commission on Medicaid and the Uninsured provides information and analysis on health care coverage and access for the low-income population, with a special focus on Medicaid's role and coverage of the uninsured. Begun in 1991 and based in the Kaiser Family Foundation's Washington, DC office, the Commission is the largest operating program of the Foundation. The Commission's work is conducted by Foundation staff under the guidance of a bi-partisan group of national leaders and experts in health care and public policy.

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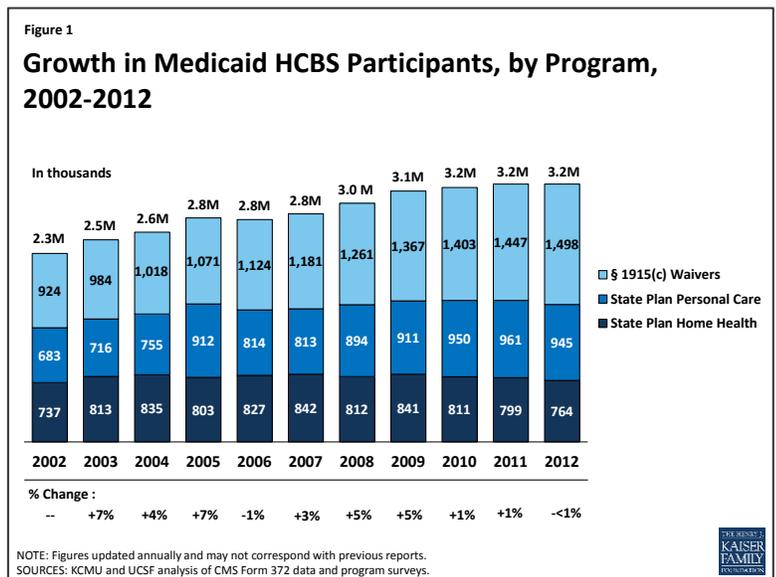
Executive Summary

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 the majority of national Medicaid long-term services and supports (LTSS) dollars (51%), increasing from 18 percent in 1995.¹ State Medicaid programs are operating in an environment of sustained economic improvement and as of 2015, 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. States also continue to have access to some of ACA’s new and expanded LTSS options, some of which offer enhanced federal matching funds, to expand beneficiary access to Medicaid HCBS.

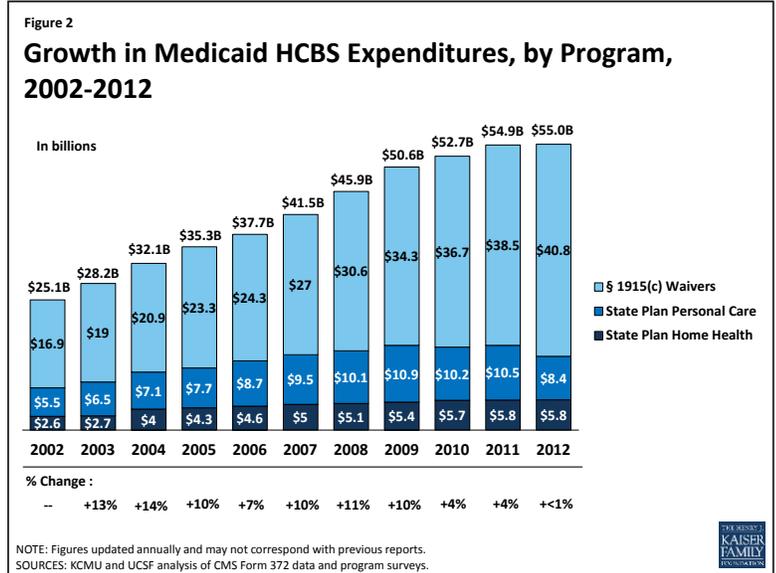
This report summarizes the key national trends to emerge from the latest (2012) participant and expenditure data for the three main Medicaid HCBS programs: (1) the mandatory home health services state plan benefit, (2) the optional personal care services state plan benefit, and (3) optional § 1915(c) HCBS waivers. It also briefly discusses the provision of Medicaid HCBS through § 1115 demonstration waivers and highlights findings from a 2014 survey of Medicaid HCBS participant eligibility, enrollment, and provider reimbursement policies. 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, 2002–2012

- In 2012, more than 3.2 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 2011 to 2012 (by 3%), while the number of people receiving personal care state plan services and home health state plan services decreased (by 2% and 4%, respectively). A total of 764,487 people received home health state plan services (in 50 states and DC), 944,507 received personal care state plan services (in 32 states), and almost 1.5 million were served through § 1915(c) waivers (in 47 states and DC). The number of individual § 1915(c) waivers declined slightly (<1%) to 290 nationwide in 2012. States also may offer HCBS through the new ACA options instead of or in addition to these three programs.

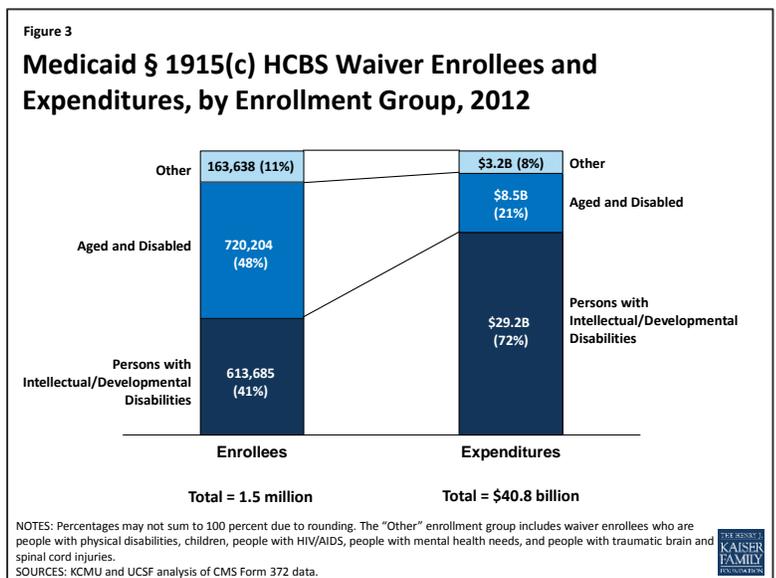


- In 2012, Medicaid HCBS expenditures for home health state plan services, personal care state plan services, and § 1915(c) waivers totaled \$55 billion, increasing slightly from 2011, and lower than the 10-year average of eight percent (Figure 2).** In 2012, spending growth in HCBS programs was led by § 1915(c) waivers (6%), followed by home health state plan services (1%). Expenditures on personal care state plan services declined by 20 percent from 2011, with most of the decline driven by California's shifting of funding to its new Community First Choice state plan option.



- Per participant annual spending on Medicaid HCBS averaged \$17,151 in 2012, but there was considerable variation among states and programs.** Across the states, Medicaid HCBS expenditures per participant served ranged from \$8,787 in Mississippi to \$42,556 in Tennessee. Per participant spending also varied across the three main HCBS programs, ranging from a national average of \$7,617 for home health state plan services participants to \$27,232 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% of spending on waiver services in 2012.** People with I/DD accounted for 41% of HCBS waiver enrollment in 2012, but 72% of spending on waiver services was devoted to this population, again reflecting their more intensive need for LTSS relative to other groups (Figure 3).



- A minority of states use § 1115 demonstration waivers to deliver HCBS.** As of 2012, 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 Medicaid managed

care programs that include HCBS for at least some geographic areas and/or populations; these states also offer HCBS via § 1915(c) waivers for other geographic areas and/or populations.²

2014 POLICIES IN MEDICAID HCBS PROGRAMS

- **In 2014, 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 of institutional care. However, 10 § 1915(c) waivers used more restrictive functional eligibility criteria than those used for institutional care. Almost two-third of states offering personal care state plan services (62%, or 21 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 services programs.
- **In 2014, more than 582,000 people were on § 1915(c) waiver waiting lists, and the average waiting time exceeded two years.** The growth in the number of people on waiting lists continued to increase, although by a smaller percent than the average annual growth rate (8.5% in 2013 compared to 11% average growth over the preceding decade). The average national waiting time for § 1915(c) waiver services was 29 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 three months for HIV/AIDS waivers to 47 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-two states (or 90%) with § 1915(c) waivers permitted or required self-direction in at least one of their waivers in 2014. Of the states offering personal care state plan services, 24 (or 71%) permitted self-direction. In contrast, only nine states (or 18%) allowed self-direction of home health state plan services in 2014.
- **For both home health and personal care agencies, provider reimbursement rates increased slightly from 2013 to 2014.** The national average reimbursement rate per visit for home health agencies was \$92.69 and \$91.45 in 2014 and 2013, respectively. The hourly reimbursement rate for agencies providing personal care state plan services increased slightly (\$18.73 in 2014, and \$18.20 in 2013).

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 (74%) 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 services (HCBS) alternatives to institutional care has been a priority for many state Medicaid programs over the past three decades. The national share of Medicaid LTSS spending on HCBS has nearly tripled, from 18 percent in 1995 to 51 percent in 2013.³ States' efforts to expand HCBS options for LTSS 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. Medicaid LTSS expenditures represent 34 percent of total Medicaid spending in 2013, with HCBS typically costing less than comparable institutional care.⁵ Budgetary constraints in an environment of sustained economic improvement after the worst recession since the Great Depression and the administrative complexities of implementing and coordinating the various LTSS options may pose challenges as states and the federal government continue to work toward increasing access to Medicaid HCBS, reducing institutional bias, and rebalancing Medicaid LTSS expenditures.

Over the last fourteen 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 mandatory home health services state plan benefit, (2) the optional personal care services state plan benefit, and (3) optional § 1915(c) HCBS waivers. Medicaid HCBS also may be provided through new and expanded options available under the Affordable Care Act (ACA), such as the § 1915(i) HCBS state plan option, the Money Follows the Person demonstration,⁶ the § 1915(k) Community First Choice state plan option, and the Balancing Incentive Program;⁷ participants and expenditures attributable to the ACA HCBS options are outside the scope of this report.

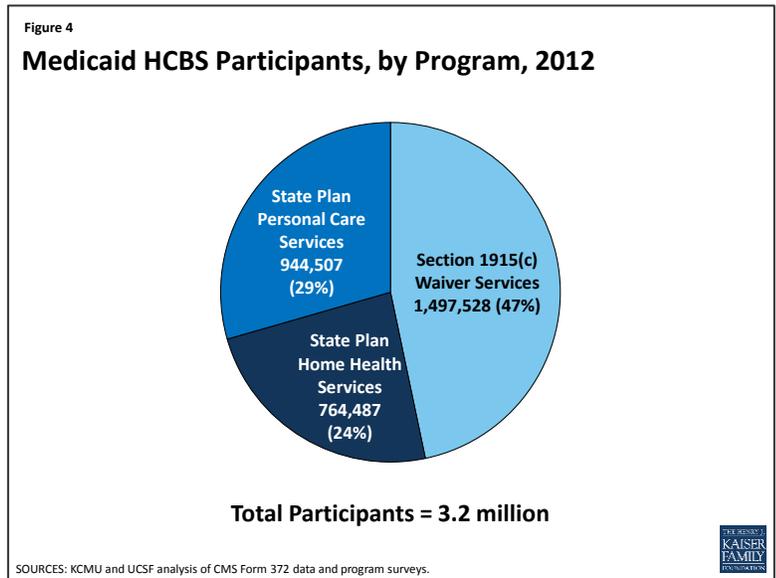
In addition, a minority of states provide some or all of their HCBS through § 1115 demonstration waivers, which are briefly discussed in this report. For example, Arizona, Rhode Island, and Vermont do not offer any § 1915(c) waivers and instead operate their entire Medicaid LTSS programs through § 1115 demonstration waivers.

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. In these state-level surveys, we collect data on eligibility criteria, providers, and scope of services as well as provider reimbursement rates. This report summarizes the main trends to emerge from the latest (2012) participant and expenditure data for the three main Medicaid HCBS programs and findings from the 2014 survey of policies impacting the mandatory home health services state plan benefit, the optional personal care services state plan benefit, and § 1915(c) waivers.

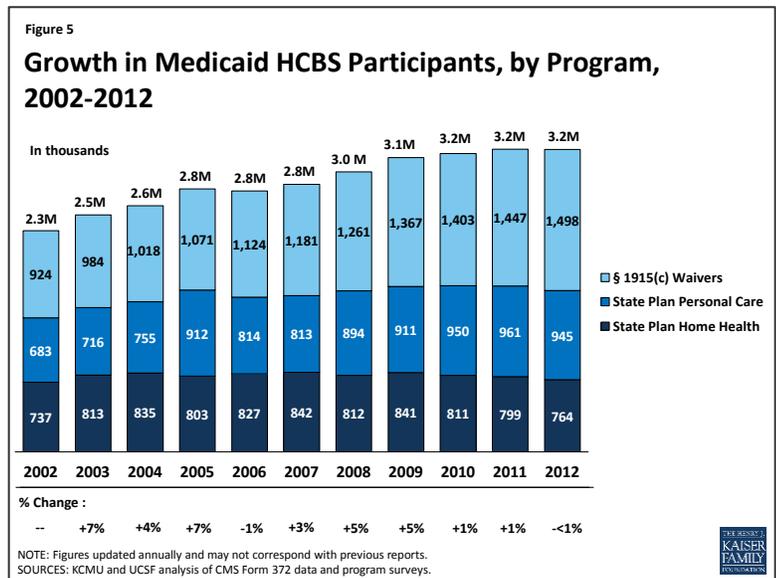
MEDICAID HCBS PARTICIPANTS AND EXPENDITURES IN 2012

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

In 2012, over 3.2 million individuals received services through the three main Medicaid HCBS programs (Table 1A). Of those participants, 764,487 individuals received home health services through the mandatory state plan benefit, 944,507 individuals received personal care services through the optional state plan benefit, and 1,497,528 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, with Kansas as the latest state to elect this option in 2007 (Table 1C). (Delaware and Rhode Island had approval from the Centers for Medicare and Medicaid Services (CMS) to offer personal care state plan services but did not report any participants in their programs.) Forty-seven states and DC operated multiple § 1915(c) waivers in 2012 (Table 1D).



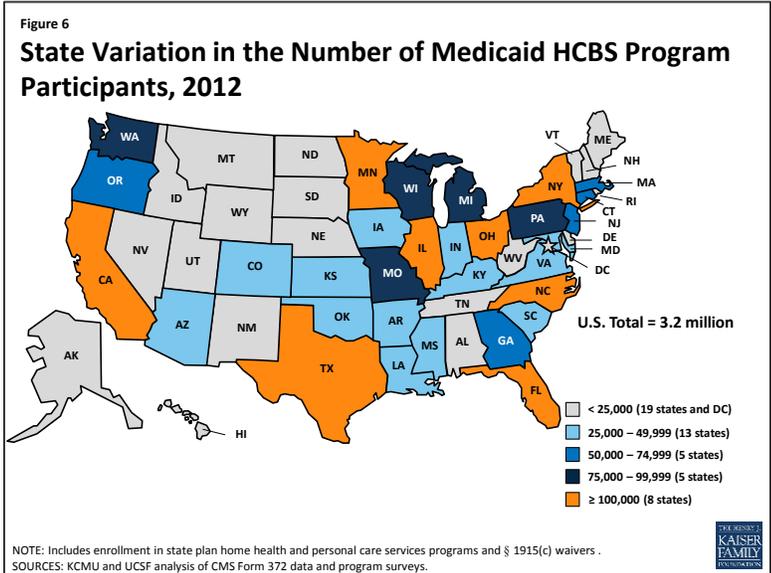
Participation in the three main HCBS programs declined by less than one percent between 2011 and 2012, the first annual decline since 2006, following two years of slight growth. This was also well below the 10-year average growth rate of three percent (Table 1A and Figure 5).



Leading the 13 states with a decline in total HCBS enrollment between 2011 and 2012 was Texas, with a 17 percent decline reported. Louisiana recorded the second largest decline with a 9 percent drop in total HCBS enrollment between 2011 and 2012 (Table 1A). Both Texas and

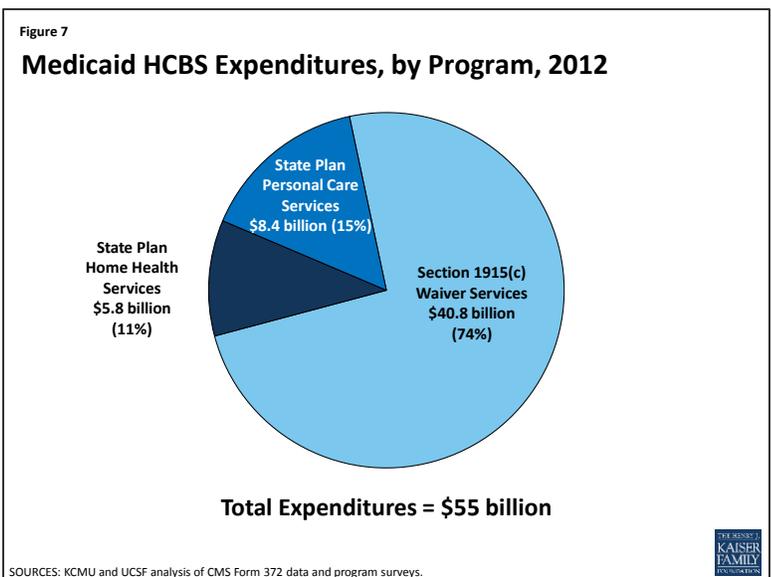
Louisiana's declines in total HCBS enrollment were led by a drop in their § 1915(c) waiver enrollment as the number of waivers declined in both states. Three waivers in Texas were terminated (one for people with I/DD and 2 for the aged/disabled population), while another was converted to a § 1115 Managed Care waiver in 2012. Louisiana terminated one large aged and disabled waiver. On the other hand, Idaho, Minnesota, and Maine saw the largest increases (27%, 15%, and 14%, respectively) in total HCBS participants in 2012. Idaho's participant growth was driven by large increases in its two state plan programs while both Minnesota and Maine experienced relatively high participant growth in their home health programs.

The decline in total HCBS enrollment in 2012 was led by declines in participation in both the home health state plan program (-4%) and in the personal care state plan services program (-2%) (Tables 1B and 1C). Nebraska led the decline in home health program enrollment with a 27 percent drop, due to a change in reporting when the state moved to managed care, while Maine led the decline in personal care state plan participation with a 33 percent drop in 2012, also due to a change in reporting. Nationally, § 1915(c) waiver program participation increased by three percent from 2011 to 2012, and seven states reported declines in participation led by Louisiana (-24%) and Texas (-19%) as noted above (Table 1D). Figure 6 illustrates the variation in total Medicaid HCBS program participation among the states.

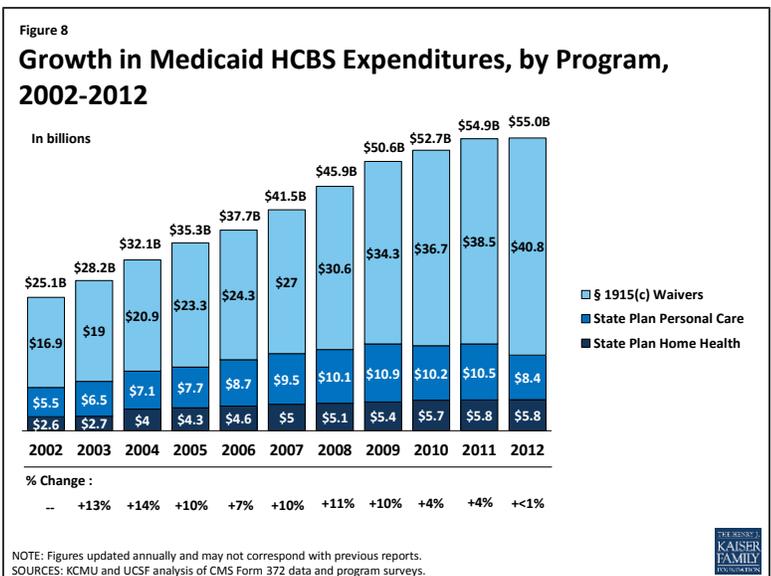


EXPENDITURES IN MEDICAID HOME HEALTH AND PERSONAL CARE STATE PLAN SERVICES AND § 1915(C) WAIVERS

In 2012, total Medicaid spending on HCBS across the three main programs was \$55 billion (Table 2A). The large majority of Medicaid spending on HCBS was for § 1915(c) waivers. In 2012, Medicaid spending on § 1915(c) waivers was \$40.8 billion, compared to \$8.4 billion on personal care state plan services and \$5.8 billion on home health state plan services (Tables 2B, 2C, 2D and Figure 7).



Between 2002 and 2012, total annual Medicaid spending on HCBS in the three main programs increased by almost \$30 billion (119%) with an average annual increase of eight percent (Figure 8). HCBS spending recorded slight growth between 2011 and 2012, the lowest rate of growth within the 14-year study period. However, this low rate of growth in HCBS spending was still more than the decline of four percent recorded for total Medicaid acute and LTSS expenditures in the same period, which corresponded with a decline in total Medicaid spending growth.⁸ Amid

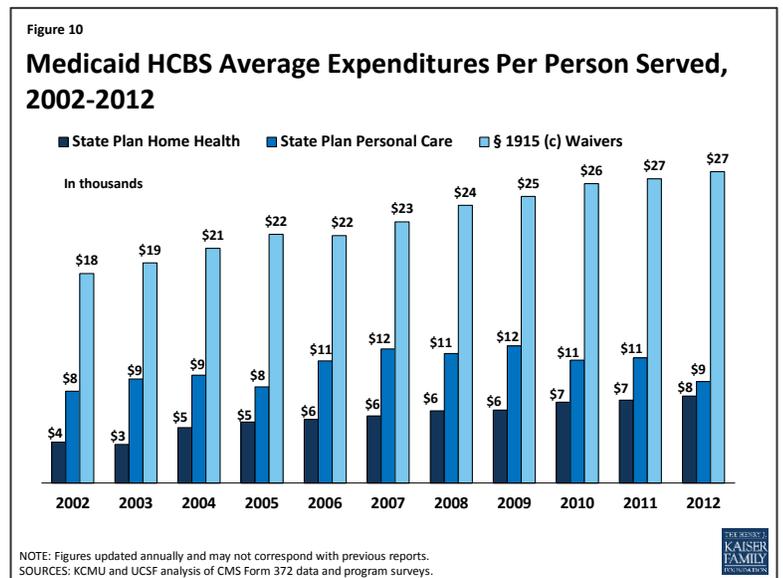
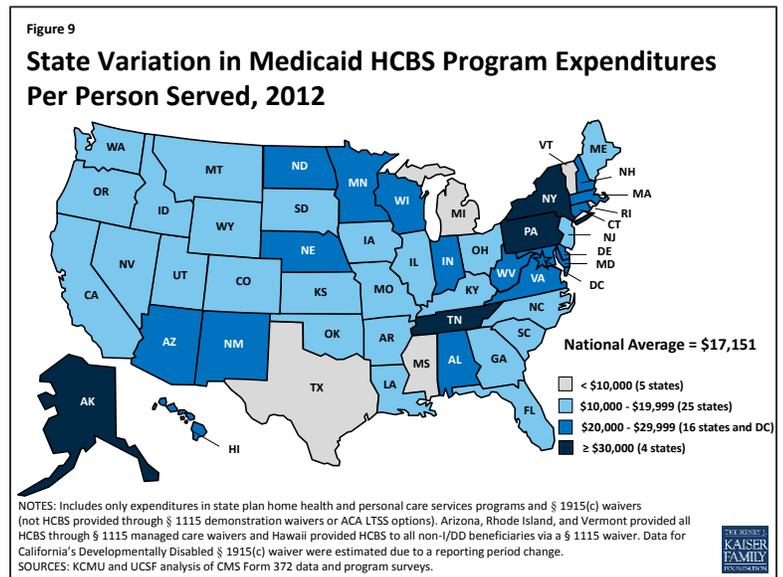


the stagnant growth in HCBS expenditures, 11 states reported a decline in total Medicaid HCBS expenditures between 2011 and 2012. Declines were led by Texas and Wyoming (both -21%) (Table 2A).

However, Medicaid HCBS expenditures as a proportion of total Medicaid LTSS expenditures continued to increase between 2011 and 2012 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 \$17,151 in 2012, state spending ranged from \$8,787 in Mississippi to \$42,556 in Tennessee (Figure 9, Table 3A).

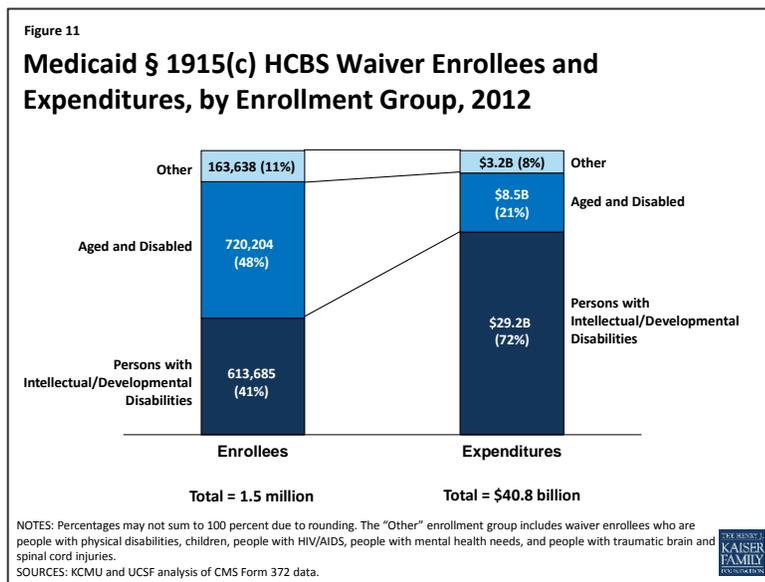
Second, differences exist in spending across the three major Medicaid HCBS programs. National per participant expenditures ranged from \$7,617 for home health state plan services participants to \$27,232 for § 1915(c) waiver participants in 2012 (Table 3B, 3C, 3D and Figure 10). This difference was likely 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 2011 and 2012, the number of § 1915(c) waivers declined slightly to 290. In 2012, 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 § 1915(c) waivers 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 2012, 1,497,528 participants were served through Medicaid § 1915(c) waivers (Tables 4 and 5). The three percent (or 50,147 beneficiaries) increase from 2011 to 2012 is the same rate of increase as between 2010 to 2011. The largest share of § 1915(c) waiver participants in 2012 (720,204 beneficiaries, or 48%) received services through waivers that targeted the aged and aged or disabled. The next largest group of waiver participants (613,685) was enrolled in § 1915(c) waivers for persons 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 (87,017) of § 1915(c) waiver participants nationwide. The § 1915(c) waivers with the smallest enrollment were those for children who are medically fragile or technology-dependent (41,950), individuals with TBI/SCI (17,072), individuals with HIV/AIDS (13,538), and individuals with mental health disabilities (4,061) (Tables 4 and 5). The § 1915(c) waivers with the largest annual increase in participation were those targeted to people with mental health disabilities (12%), followed by those serving aged individuals (8%). There was a slight decline (less than 1%) in participants for waivers serving aged and disabled individuals, the only decline recorded among all waiver groups (Table 4).



In 2012, overall expenditures for § 1915(c) waivers increased to \$40.8 billion, a six percent increase compared to 2011, and the same rate of increase as between 2010 to 2011. 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 72 percent of all § 1915(c) waiver spending (Tables 4 and 6 and Figure 10). Between 2011 and 2012, the annual rate of expenditure growth was highest for mental health waivers (15%), mainly due to growth in the five existing § 1915(c) waivers for persons with mental health disabilities. There was a four percent decline in expenditures on waivers serving aged and disabled individuals as well as a less than one percent decline recorded in waivers serving individuals with HIV/AIDS (Table 4).

Growth in § 1915(c) waiver expenditures per participant remained at two percent in 2011-2012, the same as the growth rate in 2010-2011, but lower than the 10-year average of five percent (Tables 4 and 7). Persons with I/DD had the highest spending per participant served (\$47,522) (Tables 4 and 7). This amount was more than four times higher than average waiver spending on both aged (\$11,490) and aged or disabled (\$11,834) waiver participants (Tables 4 and 7). Per participant expenditures grew by eight percent from 2011 to 2012 for waivers serving children who are medically fragile or technology-dependent, with waivers serving the aged and disabled, physically disabled and persons with HIV/AIDS all showing slight declines in per participant spending (Table 4).

MEDICAID § 1915(C) WAIVER SERVICES

As part of the collection of participant and expenditure data for § 1915(c) waivers, service type data were also collected for individual waivers. States may provide many different services within waivers, which have been collapsed into six categories here: (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 received “other” services including assistance with chores, meals, transportation, and home modifications. More than 799,000 waiver participants received respite, home health or personal care services within waivers in 2011, with Ohio providing these services to the most waiver enrollees (75,334) (Table 8).

Of the total \$40.8 billion spent on § 1915(c) waivers in 2012, almost 38% (\$15.4 billion) was spent on habilitation or adult day care services, with New York spending more than \$5 billion and Pennsylvania spending almost \$1.5 billion. States spent more than \$11.5 billion on respite, home health or personal care services within waivers, with Ohio spending almost \$1.4 billion on such services (Table 9). The most expensive waiver service on a per participant basis in 2012 was habilitation or adult day care services, with more than \$28,000 spent per waiver participant nationwide. There is large inter-state variation in habilitation or adult day care services spending per participant, ranging from \$1,702 in Georgia to \$59,387 in Connecticut. Case management was the least expensive § 1915(c) waiver service nationwide at \$1,647 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 managed LTSS.

In 2012, three states (Arizona, Rhode Island, and Vermont) use § 1115 waivers to administer statewide Medicaid capitated managed care programs that include all covered HCBS for all populations and services; these states do not offer any § 1915(c) waivers. In 2012, Arizona spent \$1 billion on HCBS for 43,231 participants, Rhode Island spent \$446 million on HCBS for 4,632 participants, and Vermont spent \$247 million on HCBS for 3,675 participants.¹³ Vermont’s model is unique in that the state serves as the managed care entity. Other states that administer Medicaid managed care programs that include HCBS contract with private health plans to provide covered services for a capitated per member per month rate. In addition to Arizona, Rhode Island, and Vermont’s statewide programs, another five states¹⁴ (Delaware, Hawaii, New York, Tennessee, and Texas) use § 1115 waivers for Medicaid capitated managed care programs that include HCBS for at least some geographic areas and/or populations in 2012; these states also offer § 1915(c) waivers for other HCBS.¹⁵ Other states implement 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).¹⁶

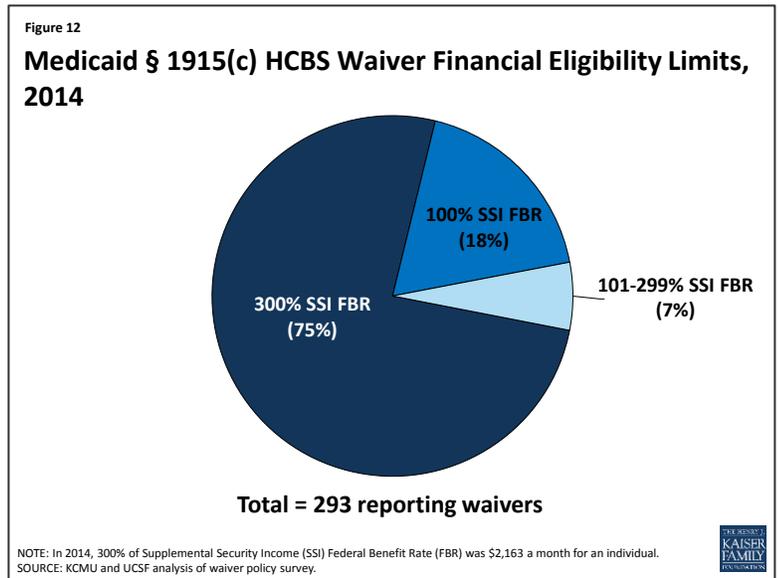
ELIGIBILITY AND COST CONTAINMENT POLICIES USED IN MEDICAID HCBS PROGRAMS IN 2014

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 2014, 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 2014 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 federal Supplemental Security Income (SSI) federal benefit rate (\$2,163/month for an individual in 2014). 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 2014 (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 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 admission. The 2014 survey found that 10 § 1915(c) waiver programs (3%) used functional eligibility criteria that are more

restrictive than the criteria used for institutional care (no table shown); these waivers were reported in Alabama, Florida, Georgia, Indiana, Kansas, New York, Texas, and Utah.

COST CONTROLS

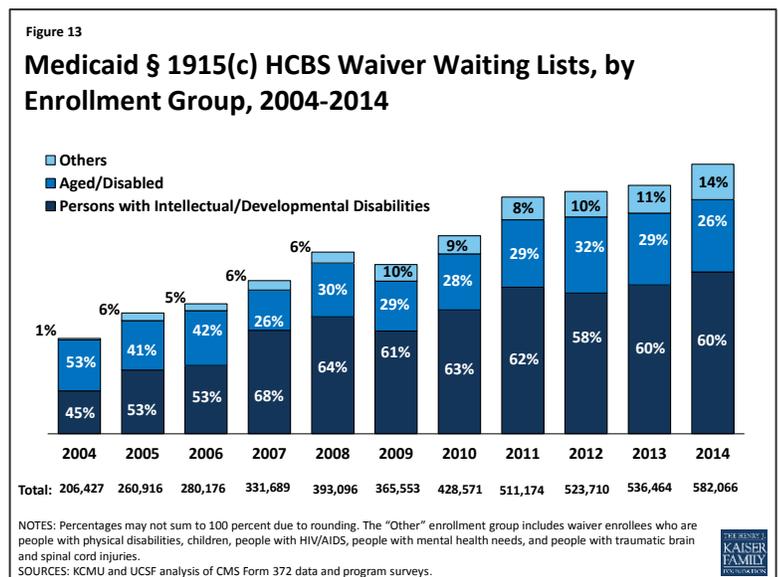
Approximately 88 percent (42 states) of all states with § 1915(c) waivers utilized some form of cost controls above and beyond the federally mandated cost neutrality formula in 2014. Many states used a mixture of fixed expenditure caps, service provision and hourly caps, and geographic limits (Table 12). Of the states with waiver cost controls in place, half (21 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 2014, 179 waivers in 42 states (61% of waivers and 90% of states) either allowed or required some form of self-direction (Table 12).

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 2014, 39 states reported waiver waiting lists while 8 states and DC reported no such lists (Table 14). In 2014, there were 582,066 individuals on waiver waiting lists across 154 § 1915(c) waivers. Section 1915(c) waivers for people with I/DD had the greatest number of individuals on waiting lists (349,511 individuals, or 60% of total waiting list enrollment) followed by waivers serving people who are aged and aged or disabled (155,697 individuals, or 27% of total waiting list enrollment) (Table 14, Figure 13). Most states reported that virtually all of the persons on waiver waiting lists currently reside in the community and not in an institution, 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 varied by population and ranged from three months for HIV/AIDS waivers to 47 months for I/DD waivers, with an average national waiting time of 29 months across all § 1915(c) waivers with waiting lists (Table 14).



The number of individuals on § 1915(c) waiver waiting lists grew by 8.5 percent from 2013 to 2014, far outpacing the growth rate of 2 percent in the 2012-2013 period. From 2004 to 2014, waiting list enrollment grew by an average of 11 percent annually. Waiting lists for all § 1915(c) waiver target populations increased, with the exception of waivers for people who are aged as well as those for persons with HIV/AIDS (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 2014, more than two-thirds (68%) 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, almost three quarters (73%) of all waivers with waiting lists had a policy of prioritizing certain individuals for waiver services (e.g., persons 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 while they awaited a waiver slot.

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 2014, 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 2014 survey findings shows how states use cost control policies to limit access to Medicaid home health and personal care state plan services. (Although Rhode Island and Delaware did not report participants or expenditures for personal care state plan services in 2014, their policy survey responses are included.)

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, 16 states (31%) 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 13 states (38%) and 20 states (59%), 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, 31 states (91%) provided assistance with instrumental ADLs, while 14 states (41%) provided some sort of transportation services. Case management was offered in 6 states (18%) 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 2014, while 62 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 two states used cost control limits. Among the 30 states with cost controls in their home health services state plan benefit, only Connecticut had a combination of expenditure and service limits; 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 2014, only nine 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 \$92.69 per home health visit in 2014, compared to \$91.45 in 2013. In states that paid registered nurses or home health aides directly or mandated their reimbursement rates, the average rate per visit was \$87.46 and \$54.14, respectively, a slight increase from 2013 (Table 15). For the personal care services state plan option, the average rate paid to provider agencies was \$18.73 per hour in 2014, a slight increase from \$18.20 per hour in 2013. 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 \$13.02 per hour in 2014 (Table 15). (Note: reimbursement rates for services provided under § 1915(c) waivers are not included in the policy survey.) Medicaid provider reimbursement rates are often set by state legislatures as part of the budget process.

Conclusion and Looking Ahead

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 (74%) of spending on LTSS provided in community settings, and continued growth in waiver waiting list enrollment, to more than 582,000 persons nationally with waiting times of almost two and a half years, highlight the need for community-based LTSS, especially for individuals with I/DD and people who are aged or disabled.

At the same time, competing pressures in state budgets may mean that states may face uncertainties for the provision of Medicaid LTSS in the coming years, and states are continuing to utilize cost control measures

within their Medicaid programs. In response to fiscal pressures and a desire to better coordinate beneficiaries' LTSS, some states are looking to incorporate HCBS into Medicaid managed care arrangements. States also are working to come into compliance with CMS's rule defining the qualities of the settings in which Medicaid HCBS can be provided and assessing the impact of the new Department of Labor rules that extends Fair Labor Standards Act minimum wage and overtime pay protections to direct care workers who were previously exempt, which are expected to take effect in fall 2015.¹⁷ The impact of all of these initiatives on HCBS access warrants further analysis. 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.

Table 1A: Total Medicaid HCBS Participants, by State, 2002–2012

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	2,343,629	2,512,560	2,608,196	2,786,138	2,765,198	2,836,484	2,967,189	3,119,526	3,163,055	3,206,806	3,206,521	<-1%
AK	5,328	6,365	8,243	8,915	8,032	7,912	7,859	8,136	8,437	8,862	8,983	1%
AL	19,235	19,766	19,723	20,330	20,823	21,327	21,888	24,552	22,078	21,320	20,305	-5%
AR	34,414	33,506	33,970	34,174	34,559	33,174	33,145	34,891	34,726	35,763	36,519	2%
AZ	24,685	27,545	29,934	31,197	32,358	33,891	34,968	36,045	37,122	38,199	39,275	3%
CA	421,556	446,510	454,476	482,776	493,315	516,338	599,526	605,489	586,696	594,425	554,567	-7%
CO	34,293	33,615	34,270	31,264	36,721	38,637	40,455	42,927	44,185	46,078	47,763	4%
CT	38,782	38,053	39,467	40,027	38,242	29,917	31,145	47,566	49,311	52,879	55,061	4%
DC	4,238	5,081	5,574	6,818	7,579	9,027	9,541	9,952	10,678	11,404	12,268	8%
DE	3,258	3,794	4,162	4,070	4,224	4,171	4,078	4,123	4,104	4,262	4,327	2%
FL	84,974	85,604	87,836	94,323	99,857	89,176	82,578	104,833	93,073	96,126	107,410	12%
GA	33,513	36,999	40,871	43,425	41,585	41,812	46,614	50,538	52,443	51,890	55,419	7%
HI	6,547	6,277	4,643	5,663	6,060	6,502	7,088	4,197	4,305	4,454	4,583	3%
IA	32,968	37,087	42,110	42,618	36,259	38,517	40,185	40,670	42,010	42,564	42,046	-1%
ID	10,754	13,021	15,827	16,552	17,004	17,976	18,784	17,528	17,244	16,828	21,364	27%
IL	64,894	73,070	77,419	81,714	85,935	85,354	93,287	100,021	104,701	111,852	117,982	5%
IN	16,221	19,601	22,413	21,318	22,271	24,476	26,323	29,952	33,504	35,265	38,144	8%
KS	24,343	25,338	27,767	29,213	30,211	30,752	33,423	33,916	33,631	33,591	32,251	-4%
KY	41,654	42,514	39,063	37,337	34,100	33,266	33,228	32,806	34,384	35,832	36,686	2%
LA	16,271	18,258	24,126	26,001	27,758	30,970	36,172	40,520	44,231	46,015	41,877	-9%
MA	47,002	48,196	46,212	50,668	52,093	52,639	55,075	59,487	63,733	65,991	70,891	7%
MD	17,170	20,215	19,478	23,662	23,705	23,360	24,505	29,434	30,346	31,156	32,332	4%
ME	8,890	9,235	9,009	8,948	9,361	8,971	9,914	10,548	10,559	18,010	20,458	14%
MI	74,784	78,884	79,901	79,275	80,200	81,426	83,051	86,146	90,738	92,456	94,086	2%
MN	50,609	51,577	56,005	59,325	78,449	84,517	90,225	94,841	99,009	89,920	103,125	15%
MO	83,734	83,771	88,565	89,271	84,810	83,068	84,091	87,404	86,304	91,254	91,646	<1%
MS	21,844	23,613	23,885	23,584	22,166	22,524	22,924	24,482	25,714	27,045	30,429	13%
MT	6,705	6,525	7,303	7,566	7,650	7,890	8,105	8,327	8,616	8,820	9,505	8%
NC	76,100	84,254	95,880	110,891	117,467	115,123	115,793	120,312	116,892	104,570	116,154	11%
ND	3,171	4,126	5,159	5,511	6,401	6,487	6,515	6,473	5,824	6,087	6,286	3%
NE	12,255	14,547	15,065	17,271	17,942	19,031	19,081	18,186	18,828	17,196	15,984	-7%
NH	7,602	8,048	8,152	7,769	8,378	9,298	9,740	10,449	10,965	11,236	11,638	4%
NJ	43,290	48,120	48,140	52,699	55,690	57,279	57,894	66,236	61,154	61,997	63,995	3%
NM	11,503	15,121	15,934	16,274	17,508	19,812	21,083	21,304	22,011	23,246	23,388	1%
NV	5,931	6,642	8,993	9,741	10,344	10,679	11,250	11,327	10,091	10,575	11,758	11%
NY	249,680	250,697	271,682	271,886	281,821	277,626	277,210	279,310	279,259	276,070	276,569	<1%
OH	74,481	133,828	143,989	83,281	88,866	103,114	96,932	105,654	110,506	123,348	132,770	8%
OK	31,906	28,685	27,556	31,255	33,538	36,434	39,720	39,047	37,891	36,957	36,960	<1%
OR	45,557	43,361	42,487	43,196	43,607	44,437	44,688	47,284	49,270	51,256	53,597	5%
PA	72,088	48,173	53,897	59,938	76,891	78,202	84,782	90,912	98,588	86,152	91,778	7%
RI	6,039	6,436	6,919	7,226	7,697	8,516	9,119	7,697	1,376	1,413	1,310	-7%
SC	31,595	27,766	27,119	27,403	27,195	29,459	31,099	31,113	29,974	29,663	30,321	2%
SD	9,197	9,255	9,769	9,646	9,862	9,986	10,013	9,218	7,880	7,413	7,265	-2%
TN	11,198	12,573	17,735	19,317	19,871	20,292	23,519	25,089	25,255	20,034	18,879	-6%
TX	269,324	309,191	291,625	427,907	319,786	335,174	320,722	339,215	367,106	381,135	317,662	-17%
UT	6,029	6,896	8,942	8,903	8,790	15,510	13,043	16,144	13,555	12,295	11,382	-7%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
VA	20,610	20,428	20,536	22,735	24,337	25,416	28,493	31,706	36,522	39,232	42,416	8%
VT	8,718	8,373	9,070	9,559	5,958	5,705	6,224	6,224	6,247	5,943	5,555	-7%
WA	53,601	63,689	64,336	67,668	69,022	69,810	71,808	73,066	77,431	80,125	88,528	3%
WI	47,268	49,148	53,940	57,055	58,048	60,578	67,941	70,285	80,133	83,652	88,219	5%
WV	14,531	15,664	15,388	14,916	16,524	16,335	17,659	19,180	19,365	19,755	19,992	1%
WY	3,289	3,519	3,631	4,058	4,328	4,591	4,684	4,765	5,050	5,196	4,813	-7%

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, 2002–2012

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	736,863	812,831	835,236	802,560	826,853	842,245	811,769	841,367	810,602	798,824	764,487	-4%
AK	232	286	273	390	373	348	294	312	298	302	281	-7%
AL	7,008	6,576	6,345	6,757	6,389	6,513	6,743	9,635	7,013	6,622	5,527	-17%
AR	7,189	6,772	6,642	6,788	6,505	6,065	5,763	6,251	6,167	6,363	6,352	<-1%
AZ	24,685	27,545	29,934	31,197	32,358	33,891	34,968	36,045	37,122	38,199	39,275	3%
CA	77,834	89,436	87,027	88,659	87,656	86,543	85,697	84,851	30,626	29,669	23,832	-20%
CO	8,789	7,326	8,275	8,687	9,430	10,412	10,964	11,037	11,134	11,998	12,201	2%
CT	22,143	20,933	21,446	21,753	22,217	14,394	15,157	26,519	27,474	30,070	31,484	5%
DC	2,030	2,124	2,360	2,855	3,406	4,090	4,236	4,382	4,528	5,178	5,549	7%
DE	989	1,324	1,601	1,428	1,467	1,324	1,269	1,214	1,159	1,150	1,105	-4%
FL	15,305	17,476	19,962	21,192	21,149	19,092	17,023	15,819	14,671	12,226	11,042	-10%
GA	8,827	10,913	13,102	14,014	8,731	6,411	6,033	5,655	5,277	4,899	4,521	-8%
HI	3,239	2,726	585	1,300	1,469	1,532	1,628	1,724	1,820	1,903	1,992	5%
IA	18,670	20,548	23,346	24,558	12,835	13,039	13,230	12,699	13,922	13,766	13,016	-5%
ID	1,999	1,794	3,295	3,326	3,321	3,936	4,475	1,882	1,790	1,871	2,111	13%
IL	12,196	12,903	12,391	13,063	14,913	14,080	13,085	14,107	14,162	13,795	12,667	-8%
IN	9,232	8,235	8,939	7,834	8,307	8,353	8,291	9,250	10,663	13,134	14,237	8%
KS	2,716	6,688	7,152	5,865	5,364	4,888	4,145	4,106	3,965	3,730	3,736	<1%
KY	23,168	24,636	23,702	22,415	19,261	18,528	18,146	16,572	15,976	15,864	14,986	-6%
LA	10,836	11,051	11,662	12,187	11,986	11,704	11,691	11,830	11,222	11,042	10,978	-1%
MA	20,177	19,521	16,498	17,875	17,591	17,214	17,653	18,231	19,977	20,899	23,001	10%
MD	3,291	3,598	1,245	4,393	4,176	3,312	3,709	3,977	4,067	4,244	4,233	<-1%
ME	3,050	3,140	2,875	2,986	3,695	3,091	2,866	2,634	2,611	7,831	11,606	48%
MI	5,720	8,301	7,080	6,573	6,551	5,996	5,896	5,796	6,395	6,044	5,253	-13%
MN	7,878	5,174	5,349	5,229	13,078	12,682	12,624	12,293	12,053	2,317	12,822	453%
MO	6,806	7,237	7,246	7,739	6,960	6,964	6,143	6,513	6,544	6,938	6,880	-1%
MS	9,283	10,351	9,472	9,044	8,223	7,949	7,888	7,889	8,749	9,257	7,923	-14%
MT	540	456	473	442	414	442	392	412	428	367	387	5%
NC	32,487	33,206	35,871	38,670	40,313	40,517	40,387	41,094	38,871	39,970	33,507	-16%
ND	205	803	899	521	813	769	865	884	758	749	954	27%
NE	5,193	5,602	5,532	7,539	7,700	8,184	7,678	5,808	6,305	4,307	3,123	-27%
NH	2,177	2,300	2,389	2,841	2,694	2,698	2,540	2,798	3,056	3,314	3,572	8%
NJ	10,219	10,896	11,322	11,136	12,653	13,564	14,695	15,826	16,957	17,481	18,392	5%
NM	487	609	391	431	447	429	396	326	273	249	523	110%
NV	1,347	1,279	980	870	798	751	705	608	658	659	698	6%
NY	92,715	89,844	110,910	109,244	117,401	113,603	109,386	108,365	107,344	106,323	105,302	-1%
OH	34,868	89,857	96,408	31,171	32,215	39,846	31,308	34,586	36,676	39,138	44,576	14%
OK	3,735	3,006	3,841	5,129	5,233	5,918	5,001	5,147	5,750	5,298	5,528	4%
OR	2,245	1,165	1,010	819	3,341	4,609	3,012	3,341	2,970	3,062	3,191	4%
PA	36,381	8,071	9,171	9,359	23,716	24,521	25,775	27,461	28,705	14,656	13,777	-6%
RI	1,000	1,365	1,588	1,658	1,546	1,566	1,436	1,406	1,376	1,413	1,310	-7%
SC	11,100	7,849	7,006	7,062	7,598	7,621	7,963	7,659	7,355	7,374	7,557	2%
SD	4,963	5,013	5,236	5,103	5,036	4,963	4,865	3,767	2,561	1,812	1,841	2%
TN	6,300	7,648	12,655	12,539	11,875	10,912	10,727	10,850	11,829	12,130	10,934	-10%
TX	157,095	186,870	170,881	187,099	192,421	209,679	198,832	210,046	230,619	235,475	199,567	-15%
UT	759	1,488	2,214	2,121	1,976	10,013	6,866	9,842	7,236	5,649	4,392	-22%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
VA	4,468	3,831	2,890	3,299	4,055	3,432	3,733	3,958	5,530	4,772	4,510	-5%
VT	3,434	3,501	3,611	3,854	3,842	3,737	3,571	3,810	3,625	3,440	3,145	-9%
WA	3,410	3,231	2,858	3,597	3,703	3,317	3,282	3,239	3,356	3,129	2,750	-12%
WI	6,180	5,903	7,006	7,430	6,742	6,204	6,035	5,866	5,697	5,317	5,040	-5%
WV	1,749	1,865	1,754	1,954	2,343	1,989	2,147	2,476	2,699	2,833	2,689	-5%
WY	514	559	536	565	567	610	555	569	583	597	611	2%

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, 2002–2012

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	683,067	715,657	755,397	912,229	814,192	813,481	894,154	911,239	949,822	960,601	944,507	-2%
AK	1,955	2,742	4,679	4,960	3,904	3,705	3,520	3,538	3,556	3,574	3,598	1%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	15,870	15,499	15,503	15,452	15,160	14,223	13,923	14,377	13,904	14,559	15,206	4%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	283,750	288,000	295,049	313,893	329,893	345,507	422,823	425,321	455,243	456,512	419,385	-8%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	1,710	2,352	2,432	2,522	2,498	2,365	2,298	2,231	2,164	2,097	2,112	1%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	14,791	14,659	14,718	13,980	12,253	357	403	944	1,235	1,744	11,115	537%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	2,253	3,377	3,614	3,601	3,777	3,773	3,799	4,266	3,331	2,163	5,918	174%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	-	18	89	147	210	273	336	23%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	-	2	4,400	6,568	8,625	11,532	14,166	17,533	18,535	18,393	-1%
MA	9,000	10,570	11,716	13,767	14,200	15,109	16,900	18,200	19,828	21,566	22,853	6%
MD	4,832	4,743	4,603	4,643	4,474	4,385	4,416	4,608	4,894	5,221	5,323	2%
ME	1,894	1,899	1,950	1,901	1,632	1,716	1,704	2,128	2,245	4,474	3,016	-33%
MI	51,425	53,351	54,986	55,158	56,210	57,980	59,124	61,324	64,956	66,930	69,090	3%
MN	7,506	6,302	8,329	9,940	16,569	18,862	20,759	22,750	24,352	22,664	23,589	4%
MO	43,964	44,835	49,295	49,481	47,435	46,969	49,333	52,732	51,115	55,473	55,665	<1%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	2,996	2,864	2,990	3,127	3,117	3,095	3,093	3,144	3,323	3,323	3,592	8%
NC	27,064	34,058	41,911	50,818	53,141	49,877	50,017	53,162	50,830	38,713	57,098	47%
ND	450	450	777	1,362	1,896	1,872	1,754	1,509	1,089	1,145	1,165	2%
NE	1,208	1,301	1,356	1,549	1,680	1,723	1,832	2,412	2,349	2,266	1,991	-12%
NH	35	26	25	25	21	16	21	25	29	28	28	0%
NJ	16,430	17,707	18,987	20,884	21,198	21,582	20,623	20,553	20,483	20,413	20,543	1%
NM	6,357	8,960	9,525	9,614	10,477	11,769	12,365	13,443	14,520	15,598	15,872	2%
NV	1,501	2,038	4,408	4,991	5,383	5,663	6,205	6,507	5,133	5,377	6,470	20%
NY	84,879	83,846	85,613	84,270	82,801	80,099	78,494	75,158	71,693	68,228	66,198	-3%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	10,000	7,000	4,342	5,505	4,077	3,700	3,327	3,475	3,885	3,836	3,998	4%
OR	1,920	2,376	4,495	5,086	3,746	3,609	3,389	3,077	3,228	3,130	3,226	3%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	1,057	948	923	901	936	986	996	861	791	763	572	-25%
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	62,366	66,967	71,381	187,099	64,425	59,025	51,567	52,628	56,510	69,409	56,161	-19%
UT	348	450	1,787	1,755	1,674	72	62	131	168	241	393	63%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	1,563	1,222	1,543	1,896	2,116	1,968	2,653	2,414	2,622	2,503	2,410	-4%
WA	11,000	21,436	22,390	22,738	23,988	25,152	27,075	25,689	27,303	27,989	26,979	-4%
WI	10,408	10,474	11,123	12,540	13,255	13,653	14,032	14,411	14,790	15,169	15,548	2%
WV	4,535	5,205	4,945	4,371	5,688	6,026	6,026	5,908	6,510	6,685	6,664	-<1%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Data may not sum to total due to rounding. Personal care services are an optional benefit. In 2012, 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, 2002–2012

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	923,699	984,072	1,017,563	1,071,349	1,124,153	1,180,758	1,261,266	1,366,921	1,402,631	1,447,381	1,497,528	3%
AK	3,141	3,337	3,291	3,565	3,755	3,859	4,045	4,286	4,583	4,986	5,104	2%
AL	12,227	13,190	13,378	13,573	14,434	14,814	15,145	14,917	15,065	14,698	14,778	1%
AR	11,355	11,235	11,825	11,934	12,894	12,886	13,459	14,263	14,655	14,841	14,961	1%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	59,972	69,074	72,400	80,224	75,766	84,288	91,006	95,317	100,827	108,244	111,350	3%
CO	25,504	26,289	25,995	22,577	27,291	28,225	29,491	31,890	33,051	34,080	35,562	4%
CT	16,639	17,120	18,021	18,274	16,025	15,523	15,988	21,047	21,837	22,809	23,577	3%
DC	498	605	782	1,441	1,675	2,572	3,007	3,339	3,986	4,129	4,607	12%
DE	2,269	2,470	2,561	2,642	2,757	2,847	2,809	2,909	2,945	3,112	3,222	4%
FL	54,878	53,469	53,156	59,151	66,455	69,727	65,152	88,070	77,167	82,156	85,253	4%
GA	24,686	26,086	27,769	29,411	32,854	35,401	40,581	44,883	47,166	46,991	50,898	8%
HI	3,308	3,551	4,058	4,363	4,591	4,970	5,460	2,473	2,485	2,551	2,591	2%
IA	14,298	16,539	18,764	18,060	23,424	25,478	26,955	27,971	28,088	28,798	29,030	1%
ID	6,502	7,850	8,918	9,625	9,906	10,267	10,510	11,380	12,123	12,794	13,335	4%
IL	52,698	60,167	65,028	68,651	71,022	71,274	80,202	85,914	90,539	98,057	105,315	7%
IN	6,989	11,366	13,474	13,484	13,964	16,123	18,032	20,702	22,841	22,131	23,907	8%
KS	21,627	18,650	20,615	23,348	24,847	25,846	29,189	29,663	29,456	29,588	28,179	-5%
KY	18,486	17,878	15,361	14,922	14,839	14,738	15,082	16,234	18,408	19,968	21,700	9%
LA	5,435	7,207	12,462	9,414	9,204	10,641	12,949	14,524	15,476	16,438	12,506	-24%
MA	17,825	18,105	17,998	19,026	20,302	20,316	20,522	23,056	23,928	23,526	25,037	6%
MD	9,047	11,874	13,630	14,626	15,055	15,663	16,380	20,849	21,385	21,691	22,776	5%
ME	3,946	4,196	4,184	4,061	4,034	4,164	5,344	5,786	5,703	5,705	5,836	2%
MI	17,639	17,232	17,835	17,544	17,439	17,450	18,031	19,026	19,387	19,482	19,743	1%
MN	35,225	40,101	42,327	44,156	48,802	52,973	56,842	59,798	62,604	64,939	66,714	3%
MO	32,964	31,699	32,024	32,051	30,415	29,135	28,615	28,159	28,645	28,843	29,101	1%
MS	12,561	13,262	14,413	14,540	13,943	14,575	15,036	16,593	16,965	17,788	22,506	27%
MT	3,169	3,205	3,840	3,997	4,119	4,353	4,620	4,771	4,865	5,130	5,526	8%
NC	16,549	16,990	18,098	21,403	24,013	24,729	25,389	26,056	27,191	25,887	25,549	-1%
ND	2,516	2,873	3,483	3,628	3,692	3,846	3,896	4,080	3,977	4,193	4,167	-1%
NE	5,854	7,644	8,177	8,183	8,562	9,124	9,571	9,966	10,174	10,623	10,870	2%
NH	5,390	5,722	5,738	4,903	5,663	6,584	7,179	7,626	7,880	7,894	8,038	2%
NJ	16,641	19,517	17,831	20,679	21,839	22,133	22,576	29,857	23,714	24,103	25,060	4%
NM	4,659	5,552	6,018	6,229	6,584	7,614	8,322	7,535	7,218	7,399	6,993	-5%
NV	3,083	3,325	3,605	3,880	4,163	4,265	4,340	4,212	4,300	4,539	4,590	1%
NY	72,086	77,007	75,159	78,372	81,619	83,924	89,330	95,787	100,222	101,519	105,069	3%
OH	39,613	43,971	47,581	52,110	56,651	63,268	65,624	71,068	73,830	84,210	88,194	5%
OK	18,171	18,679	19,373	20,621	24,228	26,816	31,392	30,425	28,256	27,823	27,434	-1%
OR	41,392	39,820	36,982	37,291	36,520	36,219	38,287	40,866	43,072	45,064	47,180	5%
PA	35,707	40,102	44,726	50,579	53,175	53,681	59,007	63,451	69,883	71,496	78,001	9%
RI	5,039	5,071	5,331	5,568	6,151	6,950	7,683	6,291	-	-	-	-
SC	20,495	19,917	20,113	20,341	19,597	21,838	23,136	23,454	22,619	22,289	22,764	2%
SD	3,177	3,294	3,610	3,642	3,890	4,037	4,152	4,590	4,528	4,838	4,852	<1%
TN	4,898	4,925	5,080	6,778	7,996	9,380	12,792	14,239	13,426	7,904	7,945	1%
TX	49,863	55,354	49,363	53,709	62,940	66,470	70,323	76,541	79,977	76,251	61,934	-19%
UT	4,922	4,958	4,941	5,027	5,140	5,425	6,115	6,171	6,151	6,405	6,597	3%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
VA	16,142	16,597	17,646	19,436	20,282	21,984	24,760	27,748	30,992	34,460	37,906	10%
VT	3,721	3,650	3,916	3,809	-	-	-	-	-	-	-	-
WA	39,191	39,022	39,088	41,333	41,331	41,341	41,451	44,138	46,772	49,007	58,799	20%
WI	30,680	32,771	35,811	37,085	38,051	40,721	47,874	50,008	59,646	63,166	67,631	7%
WV	8,247	8,594	8,689	8,591	8,493	8,320	9,486	10,796	10,156	10,237	10,639	4%
WY	2,775	2,960	3,095	3,493	3,761	3,981	4,129	4,196	4,467	4,599	4,202	-9%

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, 2002–2012 (\$, in thousands)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	25,056,851	28,216,947	32,069,976	35,265,334	37,663,246	41,481,325	45,909,251	50,596,719	52,689,115	54,852,879	54,993,769	<1%
AK	108,675	145,679	154,532	156,572	204,456	207,051	216,777	240,683	264,154	288,418	304,935	6%
AL	208,950	212,282	237,214	273,707	297,316	333,373	360,800	401,074	404,282	413,801	421,686	2%
AR	161,754	163,560	177,834	203,467	236,124	242,661	262,769	313,836	344,180	369,189	397,407	8%
AZ	429,912	502,730	571,603	642,134	694,692	783,660	793,647	803,633	813,619	823,606	833,592	1%
CA	2,923,984	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	-20%
CO	422,692	459,337	464,008	433,878	477,107	512,932	557,264	678,293	720,817	738,093	827,162	12%
CT	619,224	669,221	677,714	701,999	341,269	340,732	376,033	1,019,813	1,045,839	1,121,845	1,199,212	7%
DC	20,131	26,775	31,255	38,496	50,041	81,335	95,204	184,499	227,023	255,654	275,561	8%
DE	56,240	63,121	67,341	74,056	86,786	99,991	108,474	115,687	114,767	114,267	116,651	2%
FL	725,880	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	12%
GA	314,867	339,544	377,603	397,916	449,990	427,570	517,181	655,220	819,154	800,488	914,391	14%
HI	72,492	78,699	108,280	120,842	128,630	133,649	138,909	110,894	104,185	105,620	107,473	2%
IA	214,269	251,675	285,540	352,321	410,094	453,768	495,130	533,901	565,564	577,916	616,267	7%
ID	90,381	112,677	134,245	146,763	156,768	169,315	182,154	196,241	218,602	221,980	236,861	7%
IL	535,385	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	7%
IN	245,868	372,148	471,504	488,513	496,083	556,511	641,574	729,215	784,163	793,087	845,048	7%
KS	321,912	346,807	364,019	368,829	401,008	443,773	506,743	575,054	574,161	680,691	569,325	-16%
KY	252,314	249,306	245,138	277,332	263,695	334,418	347,118	370,523	417,182	482,639	552,634	15%
LA	169,477	201,612	481,613	605,240	383,204	473,487	632,067	748,929	742,020	762,665	674,064	-12%
MA	772,989	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	17%
MD	286,279	375,900	460,526	521,542	572,551	683,372	680,193	800,918	834,349	850,436	965,510	14%
ME	192,328	217,868	240,961	242,990	265,977	283,299	342,198	354,103	359,843	381,136	378,806	-1%
MI	667,412	583,489	656,393	663,682	667,403	713,414	749,468	786,316	820,079	853,013	899,103	5%
MN	1,112,926	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	3%
MO	511,812	570,761	580,071	616,843	653,403	729,314	806,630	895,232	844,619	1,000,729	1,080,007	8%
MS	87,631	95,938	132,325	141,184	124,416	142,763	156,100	179,224	207,517	208,309	267,373	28%
MT	85,253	88,122	97,642	105,414	112,248	117,504	137,808	151,663	165,514	168,920	174,068	3%
NC	708,834	738,981	803,021	943,140	991,647	1,092,502	1,176,824	1,185,789	1,256,967	1,199,884	1,165,326	-3%
ND	57,423	60,711	71,566	75,531	82,644	88,506	98,072	109,865	126,233	147,512	165,652	12%
NE	150,871	181,540	195,653	215,597	226,642	248,177	268,384	273,811	294,545	312,040	333,109	7%
NH	146,442	153,386	157,916	163,275	171,188	185,352	202,118	236,010	251,221	251,077	259,119	3%
NJ	630,458	741,790	743,903	804,134	809,575	840,544	866,594	1,012,815	1,082,551	1,132,610	1,256,614	11%
NM	315,871	386,869	443,841	424,686	463,942	504,150	557,314	546,763	568,229	581,356	584,713	1%
NV	55,810	61,186	87,594	95,280	126,347	142,596	152,703	155,126	158,699	164,673	168,259	2%
NY	4,649,300	5,221,679	6,383,266	7,008,325	7,761,946	8,454,236	9,040,425	9,424,447	9,670,772	9,637,079	9,614,777	<1%
OH	631,434	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	3%
OK	333,223	336,358	298,367	337,313	390,549	438,951	486,746	508,450	505,779	497,495	495,812	<-1%
OR	545,858	570,406	561,006	586,983	600,838	640,195	726,316	869,422	926,182	948,990	994,990	5%
PA	1,151,315	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	10%
RI	190,089	234,785	242,921	243,359	260,635	293,257	304,493	144,212	2,579	2,461	2,544	3%
SC	258,992	266,240	276,384	289,974	281,348	335,875	392,982	491,266	457,614	475,189	465,828	-2%
SD	68,208	72,998	85,156	79,489	89,901	97,242	104,222	109,714	115,070	116,787	120,566	3%
TN	232,033	244,002	344,406	520,247	634,819	782,847	926,555	909,931	839,807	802,345	803,423	<1%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
TX	1,219,590	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	-21%
UT	105,362	114,232	125,793	130,506	134,753	147,776	190,113	214,327	214,589	217,419	214,348	-1%
VA	331,032	363,474	361,373	431,049	529,166	620,997	710,241	838,222	950,681	1,042,903	1,124,032	8%
VT	115,170	125,870	142,778	141,610	24,210	22,501	23,152	25,853	27,838	29,063	35,070	21%
WA	607,335	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	15%
WI	688,551	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	6%
WV	190,140	215,466	239,217	264,715	269,684	302,372	332,385	356,346	381,931	392,163	483,087	23%
WY	62,469	76,936	82,799	89,724	95,313	99,314	100,436	118,588	115,003	117,709	93,227	-21%

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, 2002–2012 (\$, in thousands)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	2,642,857	2,737,352	4,043,432	4,285,354	4,607,332	4,953,786	5,132,589	5,379,034	5,736,950	5,789,439	5,823,017	1%
AK	582	848	745	1,221	1,165	1,155	957	302	335	375	319	-15%
AL	21,798	9,200	11,500	16,000	16,500	20,800	25,000	32,320	29,248	28,884	23,404	-19%
AR	10,096	9,850	12,640	13,140	13,199	11,702	10,370	14,160	15,958	16,609	16,771	1%
AZ	429,912	502,730	571,603	642,134	694,692	783,660	793,647	803,633	813,619	823,606	833,592	1%
CA	149,171	157,959	162,471	161,558	161,459	159,631	156,214	152,797	150,174	146,757	137,979	-6%
CO	85,568	96,765	99,364	75,370	90,877	88,367	88,651	126,358	148,124	160,692	211,764	32%
CT	159,092	179,555	173,256	178,419	194,780	144,862	148,520	231,265	223,456	250,615	251,585	<1%
DC	10,470	12,151	12,478	12,900	13,316	15,321	17,632	19,944	22,255	22,852	23,466	3%
DE	3,408	3,485	3,578	3,699	4,270	5,085	5,070	5,055	5,040	5,154	5,270	2%
FL	36,225	44,680	53,741	67,041	73,248	74,528	71,306	65,878	221,586	201,905	179,752	-11%
GA	14,316	13,535	7,417	6,663	6,861	5,698	5,037	4,376	3,715	3,054	2,892	-5%
HI	7,879	2,706	822	2,052	2,660	2,963	3,169	3,374	3,580	3,824	4,050	6%
IA	58,817	70,559	67,449	76,136	91,684	100,158	106,830	113,447	122,715	125,935	133,533	6%
ID	3,696	3,447	6,362	6,773	7,504	7,248	7,487	4,048	3,943	4,479	4,844	8%
IL	34,434	39,242	36,424	35,983	33,744	35,358	32,318	42,320	48,491	53,345	51,604	-3%
IN	50,980	52,176	66,990	76,746	84,227	94,117	105,813	138,778	158,242	184,603	218,663	18%
KS	8,469	40,788	40,333	16,570	16,360	14,790	12,085	12,854	10,882	9,620	9,830	2%
KY	73,974	58,124	54,134	52,479	56,169	63,172	49,893	41,885	40,880	38,652	35,099	-9%
LA	23,877	26,816	293,605	292,748	27,154	28,688	36,526	38,670	42,891	44,699	44,803	<1%
MA	65,260	66,544	64,057	62,886	64,745	71,321	85,672	100,134	120,992	150,099	194,634	30%
MD	3,040	2,633	2,523	2,691	2,591	2,044	2,327	2,361	2,798	3,061	2,943	-4%
ME	6,958	5,567	5,894	6,094	6,932	7,861	7,703	4,097	3,921	3,379	3,719	10%
MI	6,592	4,776	4,825	4,515	4,738	4,163	4,037	3,911	5,081	4,977	4,342	-13%
MN	122,259	8,225	7,594	7,419	28,587	26,329	25,160	24,020	22,364	23,347	22,456	-4%
MO	4,991	6,134	5,339	7,113	6,388	6,746	5,955	6,493	6,923	7,263	6,887	-5%
MS	13,006	14,698	28,883	19,289	12,393	11,661	7,284	4,048	8,677	7,918	6,193	-22%
MT	778	539	494	488	447	485	431	455	531	445	448	1%
NC	96,000	94,913	97,659	111,310	116,214	119,785	131,309	144,747	149,348	141,831	55,269	-61%
ND	2,233	3,026	4,944	4,925	5,256	5,018	5,750	6,267	7,652	6,682	8,670	30%
NE	18,418	20,658	19,721	32,005	32,985	34,753	38,132	24,832	25,838	19,199	17,425	-9%
NH	2,828	3,028	3,205	3,884	3,205	3,884	2,980	3,490	4,001	4,511	5,022	11%
NJ	35,800	36,608	37,591	38,865	42,634	45,367	49,037	52,707	56,376	57,649	58,950	2%
NM	1,082	538	315	386	451	441	426	327	289	254	1,740	584%
NV	5,619	6,136	2,218	4,325	2,180	3,394	3,347	3,155	5,113	7,513	11,034	47%
NY	660,138	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%
OH	38,713	114,663	132,313	83,193	98,579	151,244	149,864	182,308	214,740	250,636	294,259	17%
OK	1,253	4,158	5,411	7,742	8,994	12,001	10,739	11,490	13,396	14,209	14,770	4%
OR	984	1,006	1,033	1,068	544	475	1,055	544	663	490	607	24%
PA	131,801	37,159	45,277	52,370	139,112	159,887	187,338	216,248	224,029	88,310	90,462	2%
RI	3,033	3,114	3,632	3,755	3,427	3,266	3,037	2,808	2,579	2,461	2,544	3%
SC	18,000	18,406	18,901	19,541	22,660	26,357	29,632	30,265	30,899	32,854	33,595	2%
SD	3,955	4,044	4,153	4,293	3,957	4,700	4,763	4,827	4,891	5,098	5,771	13%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
TN	22,000	33,818	69,346	136,076	195,439	278,452	318,237	244,845	207,652	211,821	202,985	-4%
TX	152,358	176,894	414,933	459,642	481,609	429,354	467,050	528,469	622,167	679,625	643,671	-5%
UT	1,470	2,908	8,801	9,217	9,557	13,284	32,895	35,518	34,183	34,903	27,503	-21%
VA	5,002	4,434	3,053	4,556	5,019	4,787	5,842	6,228	7,166	7,935	7,920	<-1%
VT	7,772	7,972	7,652	7,633	7,798	5,668	6,313	6,576	6,302	6,877	13,295	93%
WA	4,448	3,843	3,236	4,489	4,615	4,337	4,282	4,201	4,365	3,980	3,021	-24%
WI	20,600	18,232	18,722	19,356	18,653	18,133	17,633	17,134	16,635	17,082	17,541	3%
WV	2,536	2,594	2,663	2,754	3,513	3,066	3,372	3,886	4,348	4,752	4,784	1%
WY	1,166	1,231	1,217	1,378	1,545	1,936	1,705	1,953	2,201	2,449	2,697	10%

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, 2002–2012 (\$, in thousands)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	5,491,079	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	-20%
AK	13,753	39,328	40,384	41,752	78,154	73,174	72,474	77,336	82,197	87,059	91,921	6%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	53,367	52,311	53,920	61,134	59,892	57,422	55,633	70,117	71,263	78,580	84,946	8%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	1,800,000	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	-48%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	6,320	10,283	10,559	10,917	10,124	9,653	8,963	8,273	7,583	6,893	7,588	10%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	34,648	35,127	35,264	33,411	29,286	5,204	6,380	18,047	31,098	38,200	180,550	373%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	14,900	26,886	24,453	27,298	28,549	30,161	30,732	24,765	15,906	15,999	20,778	30%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	-	56	1,247	2,375	3,398	4,421	5,444	23%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	-	1	33,519	72,267	121,164	194,116	242,683	237,587	190,140	185,443	-2%
MA	160,000	193,168	221,845	243,905	268,960	283,566	314,501	355,674	394,358	436,194	465,197	7%
MD	21,754	20,739	20,490	20,595	21,475	22,904	23,899	25,201	26,535	29,990	31,062	4%
ME	10,703	10,358	11,640	10,935	10,774	9,234	6,566	14,798	16,247	45,829	27,135	-41%
MI	220,628	249,445	254,155	237,292	218,775	253,962	254,320	256,432	259,320	281,640	289,709	3%
MN	131,835	116,529	121,767	180,596	281,732	304,956	346,854	396,486	400,763	422,260	438,478	4%
MO	182,246	209,162	211,889	239,481	242,195	265,736	303,599	351,852	234,779	398,945	420,764	5%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	23,930	21,300	21,900	24,958	25,306	26,037	28,778	36,937	45,316	43,305	43,177	<-1%
NC	153,829	190,808	221,039	286,653	311,069	301,391	316,782	346,151	320,902	249,918	229,763	-8%
ND	1,960	2,004	4,556	5,314	10,949	11,367	12,369	15,964	17,433	19,041	19,830	4%
NE	6,812	8,116	8,463	9,784	10,539	11,269	13,653	13,359	13,401	12,474	12,351	-1%
NH	797	654	499	511	472	495	430	557	684	811	798	-2%
NJ	232,116	280,035	263,184	269,283	254,337	253,790	250,363	250,369	250,375	250,381	251,387	<-1%
NM	126,437	159,392	180,888	150,526	167,269	190,766	203,666	223,786	243,906	264,026	267,982	1%
NV	16,519	19,809	43,134	35,568	54,273	65,004	71,775	69,844	68,222	70,110	66,672	-5%
NY	1,709,273	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	<-1%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	29,000	31,000	12,375	14,340	11,847	10,824	10,237	10,763	12,187	12,281	11,930	-3%
OR	2,408	3,100	4,497	5,645	5,323	5,178	4,960	4,426	3,995	3,754	3,866	3%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	1,174	1,321	1,337	1,337	1,570	1,694	1,763	1,501	1,201	1,173	822	-30%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	315,238	374,444	417,973	459,642	481,520	449,989	422,475	479,569	414,168	551,443	304,501	-45%
UT	661	847	1,272	1,082	1,204	319	356	363	675	796	1,352	70%
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	5,715	8,165	10,616	13,131	16,411	16,832	16,839	19,277	21,536	22,186	21,775	-2%
WA	83,200	215,675	238,677	195,430	222,686	249,212	304,218	344,090	361,707	372,795	368,742	-1%
WI	105,598	113,296	123,839	128,035	136,936	140,365	145,396	150,426	155,457	160,487	163,517	2%
WV	26,258	26,850	27,571	28,505	27,037	36,793	37,800	37,676	41,253	43,273	51,696	19%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Data may not sum to total due to rounding. Personal care services are an optional benefit. In 2012, 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, 2002–2012 (\$, in thousands)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Total	16,922,915	18,962,787	20,902,423	23,307,062	24,346,957	26,981,429	30,646,107	34,282,452	36,732,392	38,539,544	40,780,098	6%
AK	94,340	105,503	113,402	113,599	125,137	132,721	143,346	163,045	181,622	200,984	212,695	6%
AL	187,152	203,082	225,714	257,707	280,816	312,573	335,800	368,754	375,034	384,918	398,281	3%
AR	98,291	101,399	111,273	129,193	163,033	173,537	196,766	229,559	256,959	274,000	295,690	8%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	974,812	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	27%
CO	337,124	362,572	364,644	358,508	386,230	424,565	468,613	551,935	572,693	577,400	615,398	7%
CT	460,132	489,666	504,458	523,580	146,489	195,870	227,512	788,548	822,383	871,230	947,627	9%
DC	3,341	4,340	8,218	14,678	26,601	56,360	68,608	156,282	197,185	225,909	244,508	8%
DE	52,833	59,637	63,763	70,357	82,517	94,906	103,405	110,632	109,727	109,113	111,381	2%
FL	655,007	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	5%
GA	300,551	326,008	370,186	391,253	443,129	421,872	512,144	650,844	815,439	797,435	911,498	14%
HI	64,614	75,994	107,459	118,789	125,971	130,686	135,740	107,520	100,605	101,796	103,423	2%
IA	155,452	181,116	218,091	276,185	318,410	353,610	388,300	420,454	442,849	451,981	482,734	7%
ID	71,785	82,344	103,431	112,692	120,714	131,905	143,935	167,428	198,753	201,503	211,240	5%
IL	500,950	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	8%
IN	194,888	319,972	404,514	411,766	411,856	462,394	535,762	590,437	625,921	608,485	626,384	3%
KS	313,443	306,019	323,687	352,258	384,648	428,926	493,410	559,825	559,881	666,650	554,051	-17%
KY	178,340	191,182	191,004	224,853	207,525	271,246	297,226	328,638	376,303	443,987	517,535	17%
LA	145,600	174,795	188,007	278,972	283,784	323,635	401,425	467,575	461,542	527,827	443,818	-16%
MA	547,730	556,405	598,623	644,222	701,180	669,355	729,983	828,454	824,339	814,855	974,873	20%
MD	261,485	352,527	437,514	498,257	548,485	658,424	653,967	773,357	805,016	817,385	931,505	14%
ME	174,667	201,944	223,427	225,961	248,270	266,204	327,929	335,208	339,675	331,928	347,952	5%
MI	440,193	329,268	397,413	421,876	443,889	455,289	491,111	525,973	555,677	566,396	605,052	7%
MN	858,833	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	3%
MO	324,576	355,464	362,843	370,250	404,820	456,831	497,076	536,887	602,917	594,521	652,357	10%
MS	74,625	81,240	103,442	121,895	112,023	131,102	148,815	175,176	198,840	200,391	261,180	30%
MT	60,545	66,284	75,248	79,969	86,495	90,983	108,599	114,271	119,668	125,171	130,443	4%
NC	459,005	453,260	484,323	545,177	564,364	671,325	728,732	694,891	786,717	808,134	880,295	9%
ND	53,230	55,680	62,066	65,292	66,439	72,121	79,953	87,634	101,147	121,788	137,152	13%
NE	125,640	152,766	167,469	173,808	183,117	202,155	216,599	235,620	255,306	280,367	303,333	8%
NH	142,817	149,705	154,211	158,880	167,511	180,973	198,708	231,962	246,536	245,754	253,299	3%
NJ	362,543	425,146	443,129	495,986	512,603	541,388	567,194	709,740	775,799	824,580	946,277	15%
NM	188,353	226,940	262,637	273,775	296,222	312,943	353,222	322,651	324,034	317,075	314,992	-1%
NV	33,672	35,241	42,243	55,387	69,893	74,198	77,581	82,127	85,363	87,050	90,553	4%
NY	2,279,889	2,720,790	3,109,629	3,538,794	3,834,334	4,293,467	4,854,758	5,354,385	5,674,515	5,714,627	5,695,048	<-1%
OH	592,720	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	2%
OK	302,970	301,201	280,582	315,231	369,707	416,125	465,770	486,196	480,197	471,006	469,112	<-1%
OR	542,466	566,300	555,476	580,270	594,972	634,543	720,301	864,453	921,524	944,746	990,517	5%
PA	1,019,514	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	10%
RI	187,056	231,671	239,289	239,604	257,209	289,991	301,456	141,405	-	-	-	-
SC	240,992	247,834	257,484	270,433	258,689	309,519	363,350	461,000	426,715	442,335	432,233	-2%
SD	63,079	67,633	79,667	73,859	84,374	90,849	97,696	103,386	108,979	110,515	113,974	3%

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
TN	210,033	210,184	275,060	384,171	439,380	504,395	608,317	665,087	632,155	590,524	600,438	2%
TX	751,995	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	-20%
UT	103,231	110,477	115,720	120,207	123,992	134,173	156,863	178,446	179,731	181,720	185,493	2%
VA	326,030	359,040	358,320	426,493	524,147	616,209	704,399	831,993	943,515	1,034,968	1,116,112	8%
VT	101,683	109,732	124,510	120,845	-	-	-	-	-	-	-	-
WA	519,687	534,670	483,394	651,600	702,137	740,802	807,682	934,887	1,011,573	1,047,640	1,267,075	21%
WI	562,353	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	6%
WV	161,346	186,022	208,982	233,456	239,133	262,513	291,214	314,784	336,330	344,138	426,607	24%
WY	61,303	75,705	81,582	88,346	93,768	97,378	98,731	116,635	112,802	115,260	90,530	-21%

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, 2002–2012 (\$)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Avg.	10,691	11,230	12,296	12,657	13,620	14,624	15,472	16,219	16,658	17,105	17,151	<1%
AK	20,397	22,888	18,747	17,563	25,455	26,169	27,583	29,582	31,309	32,545	33,947	4%
AL	10,863	10,740	12,027	13,463	14,278	15,632	16,484	16,336	18,312	19,409	20,767	7%
AR	4,700	4,882	5,235	5,954	6,832	7,315	7,928	8,995	9,911	10,323	10,882	5%
AZ	17,416	18,251	19,096	20,583	21,469	23,123	22,696	22,295	21,918	21,561	21,224	-2%
CA	6,936	8,059	8,856	9,146	10,124	11,359	10,587	11,572	11,142	11,774	10,087	-14%
CO	12,326	13,665	13,540	13,878	12,993	13,276	13,775	15,801	16,314	16,018	17,318	8%
CT	15,967	17,587	17,172	17,538	8,924	11,389	12,074	21,440	21,209	21,215	21,780	3%
DC	4,750	5,270	5,607	5,646	6,603	9,010	9,978	18,539	21,261	22,418	22,463	<1%
DE	17,262	16,637	16,180	18,196	20,546	23,973	26,600	28,059	27,965	26,814	26,957	1%
FL	8,542	9,506	10,463	10,619	11,133	13,690	15,756	9,624	14,939	16,147	16,168	<1%
GA	9,395	9,177	9,239	9,163	10,821	10,226	11,095	12,965	15,620	15,427	16,500	7%
HI	11,073	12,538	23,321	21,339	21,226	20,555	19,599	26,422	24,201	23,715	23,449	-1%
IA	6,499	6,786	6,781	8,267	11,310	11,781	12,321	13,128	13,463	13,578	14,657	8%
ID	8,404	8,653	8,482	8,867	9,219	9,419	9,697	11,196	12,677	13,191	11,087	-16%
IL	8,250	8,606	9,154	9,821	10,180	10,590	11,481	12,212	12,660	13,228	13,460	2%
IN	15,157	18,986	21,037	22,916	22,275	22,737	24,373	24,346	23,405	22,489	22,154	-1%
KS	13,224	13,687	13,110	12,625	13,274	14,431	15,161	16,955	17,072	20,264	17,653	-13%
KY	6,057	5,864	6,275	7,428	7,733	10,053	10,447	11,294	12,133	13,469	15,064	12%
LA	10,416	11,042	19,962	23,278	13,805	15,289	17,474	18,483	16,776	16,574	16,096	-3%
MA	16,446	16,933	19,141	18,769	19,866	19,458	20,520	21,589	21,020	21,232	23,059	9%
MD	16,673	18,595	23,643	22,041	24,153	29,254	27,757	27,211	27,495	27,296	29,862	9%
ME	21,634	23,592	26,747	27,156	28,413	31,579	34,517	33,571	34,079	21,162	18,516	-13%
MI	8,925	7,397	8,215	8,372	8,322	8,761	9,024	9,128	9,038	9,226	9,556	4%
MN	21,991	22,200	21,832	23,167	20,691	21,246	22,193	23,283	23,196	26,571	23,815	-10%
MO	6,112	6,813	6,550	6,910	7,704	8,780	9,592	10,242	9,787	10,966	11,785	7%
MS	4,012	4,063	5,540	5,986	5,613	6,338	6,809	7,321	8,070	7,702	8,787	14%
MT	12,715	13,505	13,370	13,933	14,673	14,893	17,003	18,213	19,210	19,152	18,313	-4%
NC	9,315	8,771	8,375	8,505	8,442	9,490	10,163	9,856	10,753	11,474	10,033	-13%
ND	18,109	14,714	13,872	13,705	12,911	13,644	15,053	16,973	21,675	24,234	26,351	9%
NE	12,311	12,480	12,987	12,483	12,632	13,041	14,066	15,056	15,644	18,146	20,840	15%
NH	19,264	19,059	19,371	21,016	20,433	19,934	20,751	22,587	22,911	22,346	22,264	<-1%
NJ	14,564	15,415	15,453	15,259	14,537	14,675	14,969	15,291	17,702	18,269	19,636	7%
NM	27,460	25,585	27,855	26,096	26,499	25,447	26,434	25,665	25,816	25,009	25,001	<-1%
NV	9,410	9,212	9,740	9,781	12,214	13,353	13,574	13,695	15,727	15,572	14,310	-8%
NY	18,621	20,829	23,495	25,777	27,542	30,452	32,612	33,742	34,630	34,908	34,764	<-1%
OH	8,478	6,653	6,800	12,330	14,019	15,001	16,190	16,584	17,259	17,677	16,986	-4%
OK	10,444	11,726	10,828	10,792	11,645	12,048	12,254	13,021	13,348	13,461	13,415	<-1%
OR	11,982	13,155	13,204	13,589	13,778	14,407	16,253	18,387	18,798	18,515	18,564	<1%
PA	15,971	24,585	24,368	24,682	16,841	17,592	24,959	26,348	26,699	29,391	30,334	3%
RI	31,477	36,480	35,109	33,678	33,862	34,436	33,392	18,736	1,874	1,741	1,943	12%
SC	8,197	9,589	10,192	10,582	10,346	11,401	12,636	15,790	15,267	16,020	15,363	-4%
SD	7,416	7,887	8,717	8,241	9,116	9,738	10,409	11,902	14,603	15,754	16,596	5%
TN	20,721	19,407	19,420	26,932	31,947	38,580	39,396	36,268	33,253	40,049	42,556	6%
TX	4,528	4,161	5,916	4,574	6,462	6,077	7,105	7,779	7,844	8,067	7,639	-5%
UT	17,476	16,565	14,068	14,659	15,330	9,528	14,576	13,276	15,831	17,684	18,832	6%
VA	16,062	17,793	17,597	18,960	21,743	24,433	24,927	26,437	26,030	26,583	26,500	<-1%
VT	13,211	15,033	15,742	14,814	4,063	3,944	3,720	4,154	4,456	4,890	6,313	29%
WA	11,331	11,842	11,274	12,584	13,466	14,244	15,544	17,562	17,792	17,777	18,512	4%
WI	14,567	16,386	16,740	17,288	18,421	18,426	17,847	20,232	20,783	20,788	20,885	<1%
WV	13,085	13,755	15,546	17,747	16,321	18,511	18,822	18,579	19,723	19,851	24,164	22%
WY	18,993	21,863	22,803	22,110	22,022	21,632	21,445	24,887	22,773	22,654	19,370	-14%

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, 2002–2012 (\$)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Avg.	3,587	3,368	4,841	5,340	5,572	5,882	6,323	6,393	7,077	7,247	7,617	5%
AK	2,510	2,965	2,730	3,131	3,124	3,319	3,256	967	1,124	1,242	1,137	-9%
AL	3,110	1,399	1,812	2,368	2,583	3,194	3,708	3,354	4,171	4,362	4,235	-3%
AR	1,404	1,455	1,903	1,936	2,029	1,929	1,799	2,265	2,588	2,610	2,640	1%
AZ	17,416	18,251	19,096	20,583	21,469	23,123	22,696	22,295	21,918	21,561	21,224	-2%
CA	1,917	1,766	1,867	1,822	1,842	1,845	1,823	1,801	4,903	4,946	5,790	17%
CO	9,736	13,208	12,008	8,676	9,637	8,487	8,086	11,449	13,304	13,393	17,356	30%
CT	7,185	8,578	8,079	8,202	8,767	10,064	9,799	8,721	8,133	8,334	7,991	-4%
DC	5,157	5,721	5,287	4,518	3,910	3,746	4,163	4,551	4,915	4,413	4,229	-4%
DE	3,446	2,632	2,235	2,591	2,910	3,840	3,995	4,164	4,348	4,483	4,768	6%
FL	2,367	2,557	2,692	3,163	3,463	3,904	4,189	4,165	15,104	16,514	16,279	-1%
GA	1,622	1,240	566	475	786	889	835	774	704	623	640	3%
HI	2,432	993	1,404	1,579	1,811	1,934	1,946	1,957	1,967	2,010	2,033	1%
IA	3,150	3,434	2,889	3,100	7,143	7,681	8,075	8,934	8,814	9,148	10,259	12%
ID	1,849	1,921	1,931	2,036	2,260	1,842	1,673	2,151	2,203	2,394	2,295	-4%
IL	2,823	3,041	2,940	2,755	2,263	2,511	2,470	3,000	3,424	3,867	4,074	5%
IN	5,522	6,336	7,494	9,797	10,139	11,267	12,762	15,003	14,840	14,055	15,359	9%
KS	3,118	6,099	5,639	2,825	3,050	3,026	2,916	3,131	2,745	2,579	2,631	2%
KY	3,193	2,359	2,284	2,341	2,916	3,410	2,750	2,527	2,559	2,436	2,342	-4%
LA	2,203	2,427	25,176	24,021	2,265	2,451	3,124	3,269	3,822	4,048	4,081	1%
MA	3,234	3,409	3,883	3,518	3,681	4,143	4,853	5,493	6,057	7,182	8,462	18%
MD	924	732	2,026	613	620	617	627	594	688	721	695	-4%
ME	2,281	1,773	2,050	2,041	1,876	2,543	2,688	1,555	1,502	432	320	-26%
MI	1,152	575	681	687	723	694	685	675	795	823	827	<1%
MN	15,519	1,590	1,420	1,419	2,186	2,076	1,993	1,954	1,855	10,076	1,751	-83%
MO	733	848	737	919	918	969	969	997	1,058	1,047	1,001	-4%
MS	1,401	1,420	3,049	2,133	1,507	1,467	923	513	992	855	782	-9%
MT	1,441	1,181	1,044	1,103	1,079	1,096	1,101	1,105	1,240	1,211	1,158	-4%
NC	2,955	2,858	2,723	2,878	2,883	2,956	3,251	3,522	3,842	3,548	1,649	-54%
ND	10,893	3,769	5,500	9,453	6,464	6,526	6,648	7,089	10,095	8,922	9,088	2%
NE	3,547	3,688	3,565	4,245	4,284	4,246	4,966	4,275	4,098	4,458	5,579	25%
NH	1,299	1,316	1,342	1,367	1,190	1,440	1,173	1,247	1,309	1,361	1,406	3%
NJ	3,503	3,360	3,320	3,490	3,369	3,345	3,337	3,330	3,325	3,298	3,205	-3%
NM	2,222	883	805	895	1,009	1,028	1,077	1,003	1,058	1,022	3,326	226%
NV	4,172	4,797	2,263	4,971	2,732	4,519	4,748	5,189	7,771	11,400	15,808	39%
NY	7,120	7,838	12,108	13,039	14,333	16,164	16,846	17,065	17,287	17,514	17,746	1%
OH	1,110	1,276	1,372	2,669	3,060	3,796	4,787	5,271	5,855	6,404	6,601	3%
OK	336	1,383	1,409	1,509	1,719	2,028	2,147	2,232	2,330	2,682	2,672	<-1%
OR	438	864	1,023	1,304	163	103	350	163	223	160	190	19%
PA	3,623	4,604	4,937	5,596	5,866	6,520	7,268	7,875	7,805	6,026	6,566	9%
RI	3,033	2,281	2,287	2,265	2,216	2,085	2,115	1,997	1,874	1,741	1,943	12%
SC	1,622	2,345	2,698	2,767	2,982	3,458	3,721	3,952	4,201	4,455	4,445	<-1%
SD	797	807	793	841	786	947	979	1,281	1,910	2,814	3,135	11%
TN	3,492	4,422	5,480	10,852	16,458	25,518	29,667	22,566	17,554	17,463	18,565	6%
TX	970	947	2,428	2,457	2,503	2,048	2,349	2,516	2,698	2,886	3,225	12%
UT	1,936	1,955	3,975	4,345	4,836	1,327	4,791	3,609	4,724	6,179	6,262	1%
VA	1,120	1,157	1,056	1,381	1,238	1,395	1,565	1,574	1,296	1,663	1,756	6%
VT	2,263	2,277	2,119	1,981	2,030	1,517	1,768	1,726	1,738	1,999	4,227	111%
WA	1,304	1,190	1,132	1,248	1,246	1,307	1,305	1,297	1,301	1,272	1,099	-14%
WI	3,333	3,089	2,672	2,605	2,767	2,923	2,922	2,921	2,920	3,213	3,481	8%
WV	1,450	1,391	1,518	1,409	1,500	1,542	1,570	1,570	1,611	1,677	1,779	6%
WY	2,268	2,203	2,270	2,438	2,725	3,173	3,072	3,432	3,775	4,102	4,414	8%

NOTES: Changes from 2010 to 2011 in Minnesota and Nevada are due to a decline in home health program participants.

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, 2002–2012 (\$)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Avg.	8,039	9,106	9,431	8,411	10,696	11,735	11,330	12,000	10,760	10,956	8,884	-19%
AK	7,035	14,343	8,631	8,418	20,019	19,750	20,589	21,859	23,115	24,359	25,548	5%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	3,363	3,375	3,478	3,956	3,951	4,037	3,996	4,877	5,125	5,397	5,586	4%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	6,344	7,986	8,830	9,103	10,316	11,615	10,232	11,439	9,502	9,527	5,414	-43%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	3,696	4,372	4,342	4,329	4,053	4,082	3,900	3,708	3,504	3,287	3,593	9%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	2,342	2,396	2,396	2,390	2,390	14,578	15,830	19,118	25,180	21,904	16,244	-26%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	6,613	7,962	6,766	7,581	7,559	7,994	8,089	5,805	4,775	7,396	3,511	-53%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	-	3,118	14,011	16,156	16,180	16,193	16,201	<1%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	-	666	7,618	11,003	14,048	16,833	17,131	13,551	10,258	10,082	-2%
MA	17,778	18,275	18,935	17,717	18,941	18,768	18,610	19,543	19,889	20,226	20,356	1%
MD	4,502	4,373	4,451	4,436	4,800	5,223	5,412	5,469	5,422	5,744	5,835	2%
ME	5,651	5,454	5,969	5,752	6,602	5,381	3,853	6,954	7,237	10,243	8,997	-12%
MI	4,290	4,676	4,622	4,302	3,892	4,380	4,301	4,182	3,992	4,208	4,193	<1%
MN	17,564	18,491	14,620	18,169	17,004	16,168	16,709	17,428	16,457	18,631	18,588	<1%
MO	4,145	4,665	4,298	4,840	5,106	5,658	6,154	6,672	4,593	7,192	7,559	5%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	7,987	7,437	7,324	7,981	8,119	8,413	9,304	11,748	13,637	13,032	12,020	-8%
NC	5,684	5,602	5,274	5,641	5,854	6,043	6,333	6,511	6,313	6,456	4,024	-38%
ND	4,356	4,454	5,863	3,902	5,775	6,072	7,052	10,579	16,009	16,630	17,022	2%
NE	5,639	6,238	6,241	6,317	6,273	6,541	7,453	5,539	5,705	5,505	6,204	13%
NH	22,780	25,137	19,956	20,438	22,486	30,934	20,496	22,293	23,594	28,969	28,509	-2%
NJ	14,128	15,815	13,861	12,894	11,998	11,759	12,140	12,182	12,224	12,266	12,237	<1%
NM	19,889	17,789	18,991	15,657	15,965	16,209	16,471	16,648	16,798	16,927	16,884	<1%
NV	11,005	9,720	9,785	7,126	10,082	11,479	11,567	10,734	13,291	13,039	10,305	-21%
NY	20,138	21,428	22,552	24,268	27,112	29,020	29,848	29,549	29,857	30,197	30,984	3%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	2,900	4,429	2,850	2,605	2,906	2,925	3,077	3,097	3,137	3,201	2,984	-7%
OR	1,254	1,305	1,000	1,110	1,421	1,435	1,463	1,438	1,237	1,199	1,198	<1%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	1,111	1,393	1,448	1,484	1,677	1,718	1,770	1,744	1,518	1,538	1,436	-7%
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	5,055	5,591	5,856	2,457	7,474	7,624	8,193	9,112	7,329	7,945	5,422	-32%
UT	1,900	1,881	712	617	719	4,428	5,735	2,772	4,020	3,304	3,439	4%
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	3,656	6,682	6,880	6,926	7,756	8,553	6,347	7,985	8,214	8,864	9,035	2%
WA	7,564	10,061	10,660	8,595	9,283	9,908	11,236	13,394	13,248	13,319	13,668	3%
WI	10,146	10,817	11,134	10,210	10,331	10,281	10,362	10,438	10,511	10,580	10,517	-1%
WV	5,790	5,159	5,576	6,521	4,753	6,106	6,273	6,377	6,337	6,473	7,758	20%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Personal care state plan services are an optional benefit. In 2012, 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, 2002–2012 (\$)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	11-12 % change
Avg.	18,321	19,270	20,542	21,755	21,658	22,851	24,298	25,080	26,188	26,627	27,232	2%
AK	30,035	31,616	34,458	31,865	33,325	34,393	35,438	38,041	39,629	40,310	41,674	3%
AL	15,306	15,397	16,872	18,987	19,455	21,100	22,172	24,720	24,894	26,188	26,950	3%
AR	8,656	9,025	9,410	10,826	12,644	13,467	14,620	16,095	17,534	18,462	19,764	7%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	16,254	16,512	17,361	17,412	18,869	20,081	20,490	20,860	20,442	23,124	28,608	24%
CO	13,218	13,792	14,027	15,879	14,152	15,042	15,890	17,307	17,328	16,943	17,305	2%
CT	27,654	28,602	27,993	28,652	9,141	12,618	14,230	37,466	37,660	38,197	40,193	5%
DC	6,709	7,174	10,509	10,186	15,881	21,913	22,813	46,805	49,469	54,713	53,072	-3%
DE	23,285	24,144	24,898	26,630	29,930	33,335	36,812	38,031	37,259	35,062	34,569	-1%
FL	11,936	13,726	15,615	15,235	15,187	16,365	18,778	10,503	14,744	15,970	16,144	1%
GA	12,175	12,498	13,331	13,303	13,488	11,917	12,620	14,501	17,289	16,970	17,908	6%
HI	19,533	21,401	26,481	27,226	27,439	26,295	24,862	43,477	40,485	39,904	39,916	<1%
IA	10,872	10,951	11,623	15,293	13,593	13,879	14,405	15,032	15,766	15,695	16,629	6%
ID	11,040	10,490	11,598	11,708	12,186	12,848	13,695	14,712	16,395	15,750	15,841	1%
IL	9,506	9,799	10,338	11,165	11,842	12,186	12,951	13,725	14,105	14,545	14,589	<1%
IN	27,885	28,152	30,022	30,537	29,494	28,679	29,712	28,521	27,403	27,495	26,201	-5%
KS	14,493	16,409	15,702	15,087	15,481	16,595	16,904	18,873	19,007	22,531	19,662	-13%
KY	9,647	10,694	12,434	15,069	13,985	18,405	19,707	20,244	20,442	22,235	23,850	7%
LA	26,789	24,254	15,086	29,634	30,833	30,414	31,000	32,193	29,823	32,110	35,488	11%
MA	30,728	30,732	33,261	33,860	34,537	32,947	35,571	35,932	34,451	34,636	38,937	12%
MD	28,903	29,689	32,099	34,067	36,432	42,036	39,925	37,093	37,644	37,683	40,899	9%
ME	44,264	48,128	53,400	55,642	61,544	63,930	61,364	57,934	59,561	58,182	59,622	2%
MI	24,956	19,108	22,283	24,047	25,454	26,091	27,237	27,645	28,662	29,073	30,646	5%
MN	24,381	25,443	25,830	26,868	26,902	27,644	28,682	29,896	29,926	29,931	29,903	<1%
MO	9,846	11,214	11,330	11,552	13,310	15,680	17,371	19,066	21,048	20,612	22,417	9%
MS	5,941	6,126	7,177	8,383	8,034	8,995	9,897	10,557	11,721	11,266	11,605	3%
MT	19,105	20,681	19,596	20,007	20,999	20,901	23,506	23,951	24,598	24,400	23,605	-3%
NC	27,736	26,678	26,761	25,472	23,502	27,147	28,703	26,669	28,933	31,218	34,456	10%
ND	21,156	19,380	17,820	17,997	17,995	18,752	20,522	21,479	25,433	29,046	32,911	13%
NE	21,462	19,985	20,480	21,240	21,387	22,156	22,631	23,642	25,094	26,392	27,906	6%
NH	26,497	26,162	26,874	32,405	29,579	27,485	27,678	30,417	31,286	31,132	31,511	1%
NJ	21,786	21,783	24,852	23,985	23,472	24,461	25,124	23,771	32,715	34,211	37,761	10%
NM	40,428	40,875	43,642	43,952	44,991	41,101	42,444	42,820	44,893	42,854	45,044	5%
NV	10,922	10,599	11,718	14,275	16,789	17,397	17,876	19,498	19,852	19,178	19,728	3%
NY	31,627	35,332	41,374	45,154	46,978	51,159	54,346	55,899	56,619	56,291	54,203	-4%
OH	14,963	17,640	17,797	18,108	20,250	22,059	21,631	22,089	22,924	22,917	22,234	-3%
OK	16,673	16,125	14,483	15,287	15,259	15,518	14,837	15,980	16,994	16,929	17,100	1%
OR	13,106	14,221	15,020	15,561	16,292	17,520	18,813	21,153	21,395	20,965	20,994	<1%
PA	28,552	28,607	28,353	28,213	21,736	22,650	32,687	34,342	34,460	34,181	34,532	1%
RI	37,122	45,686	44,886	43,032	41,816	41,726	39,238	22,477	-	-	-	-
SC	11,759	12,443	12,802	13,295	13,200	14,173	15,705	19,656	18,865	19,845	18,988	-4%
SD	19,855	20,532	22,069	20,283	21,689	22,504	23,530	22,524	24,068	22,843	23,492	3%
TN	42,881	42,677	54,146	56,679	54,951	53,775	47,554	46,709	47,084	74,712	75,574	1%
TX	15,081	13,279	18,079	19,329	17,532	17,415	19,755	21,306	23,045	24,177	23,871	-1%
UT	20,973	22,283	23,420	23,912	24,123	24,732	25,652	28,917	29,220	28,372	28,116	-1%
VA	20,198	21,633	20,306	21,943	25,843	28,030	28,449	29,984	30,444	30,034	29,444	-2%
VT	27,327	30,064	31,795	31,726	-	-	-	-	-	-	-	-
WA	13,260	13,702	12,367	15,765	16,988	17,919	19,485	21,181	21,628	21,377	21,549	1%
WI	18,330	20,560	21,234	22,623	24,013	23,519	21,922	25,086	25,036	24,718	24,566	-1%
WV	19,564	21,646	24,051	27,175	28,157	31,552	30,699	29,157	33,116	33,617	40,100	19%
WY	22,091	25,576	26,359	25,292	24,932	24,461	23,914	27,797	25,252	25,062	21,545	-14%

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, 2011 and 2012

Waiver Type	Participants			Expenditures (\$, in thousands)			Expenditures Per Participant (\$)		
	2011	2012	% Change	2011	2012	% Change	2011	2012	% Change
Total	1,447,381	1,497,528	3%	\$38,539,544	\$40,780,098	6%	\$26,627	\$27,232	2%
I/DD	579,732	613,685	6%	\$27,017,201	\$29,163,715	8%	\$46,603	\$47,522	2%
Aged (≥ 65)	175,511	189,808	8%	\$1,934,394	\$2,180,809	13%	\$11,021	\$11,490	4%
Aged/Disabled	531,723	530,396	<-1%	\$6,538,979	\$6,276,807	-4%	\$12,298	\$11,834	-4%
Physically Disabled	86,380	87,017	1%	\$1,810,874	\$1,819,031	<1%	\$20,964	\$20,904	<-1%
Children	39,930	41,950	5%	\$516,762	\$584,363	13%	\$12,942	\$13,930	8%
HIV/AIDS	13,442	13,538	1%	\$52,305	\$52,226	<-1%	\$3,891	\$3,858	-1%
Mental Health	3,640	4,061	12%	\$44,077	\$50,502	15%	\$12,109	\$12,436	3%
TBI/SCI	17,023	17,072	<1%	\$624,951	\$652,647	4%	\$36,712	\$38,229	4%

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, 2012

	No. of Waivers	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total Participants
Total	290	613,685	189,808	530,396	87,017	41,950	13,538	4,061	17,072	1,497,528
AK	4	1,624	1,819	-	1,390	270	-	-	-	5,104
AL	6	5,596	-	8,502	517	-	164	-	-	14,778
AR	4	4,132	7,300	951	2,578	-	-	-	-	14,961
CA	7	94,473	-	12,137	2,545	47	2,148	-	-	111,350
CO	11	7,700	-	22,561	-	1,983	58	3,002	258	35,562
CT	8	9,231	-	12,886	960	-	-	83	417	23,577
DC	2	1,689	-	2,919	-	-	-	-	-	4,607
DE	3	895	-	1,754	-	-	573	-	-	3,222
FL	15	30,161	27,984	19,291	118	5	7,335	-	358	85,253
GA	5	12,061	-	37,306	-	467	-	-	1,065	50,898
HI	1	2,591	-	-	-	-	-	-	-	2,591
IA	7	11,737	11,053	-	3,831	1,013	40	-	1,356	29,030
ID	4	3,250	-	9,753	-	332	-	-	-	13,335
IL	9	17,588	48,396	9,119	21,705	2,283	1,413	-	4,811	105,315
IN	5	13,625	-	10,091	-	-	-	-	191	23,907
KS	7	8,536	6,741	-	6,625	5,658	-	-	619	28,179
KY	6	10,097	-	11,161	56	-	-	-	386	21,700
LA	5	10,323	-	839	-	1,344	-	-	-	12,506
MA	8	11,392	13,321	-	-	153	-	-	170	25,037
MD	8	12,971	3,536	4,393	688	1,136	-	-	52	22,776
ME	4	4,193	-	1,487	156	-	-	-	-	5,836
MI	4	8,147	-	10,895	-	701	-	-	-	19,743
MN	5	16,225	29,310	-	19,803	-	-	-	1,376	66,714
MO	9	11,053	-	17,378	391	160	119	-	-	29,101
MS	6	1,843	-	16,508	2,557	-	-	777	821	22,506
MT	6	2,635	-	2,526	-	172	-	193	-	5,526
NC	4	11,087	-	13,075	-	1,387	-	-	-	25,549
ND	5	3,751	-	380	-	36	-	-	-	4,167
NE	5	4,457	-	5,973	-	419	-	-	21	10,870
NH	4	4,409	3,432	-	-	-	-	-	197	8,038
NJ	5	10,820	-	13,360	299	-	238	-	343	25,060
NM	6	3,990	-	2,845	-	151	7	-	-	6,993
NV	4	1,774	2,198	35	583	-	-	-	-	4,590
NY	9	69,993	-	28,479	-	3,790	-	-	2,807	105,069
OH	8	30,834	-	45,148	12,212	-	-	-	-	88,194
OK	5	4,939	-	22,186	-	309	-	-	-	27,434
OR	6	14,049	-	32,813	-	318	-	-	-	47,180
PA	9	28,952	32,755	-	9,288	6,014	348	-	644	78,001
SC	6	5,697	-	14,837	45	416	1,047	-	722	22,764
SD	4	3,294	1,424	-	133	-	-	-	-	4,852
TN	3	7,945	-	-	-	-	-	-	-	7,945
TX	7	30,266	-	25,454	-	6,214	-	-	-	61,934
UT	6	4,411	538	1,286	128	129	-	-	105	6,597
VA	7	9,754	-	27,695	409	-	48	-	-	37,906
WA	9	19,780	-	38,868	-	151	-	-	-	58,799
WI	11	24,008	-	37,427	-	6,025	-	6	165	67,631
WV	2	4,346	-	6,293	-	-	-	-	-	10,639
WY	6	1,363	-	1,785	-	867	-	-	187	4,202

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.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 6: Medicaid § 1915(c) HCBS Waiver Expenditures, by Type of Waiver and State, 2012
 (\$, in thousands)

	No. of Waivers	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total Expenditures
Total	290	29,163,715	2,180,809	6,276,807	1,819,031	584,363	52,226	50,502	652,647	40,780,098
AK	4	117,200	47,393	-	36,365	11,737	-	-	-	212,695
AL	6	289,423	-	101,556	6,164	-	1,138	-	-	398,281
AR	4	175,822	63,599	13,584	42,685	-	-	-	-	295,690
CA	7	3,006,483	-	55,745	113,823	264	9,161	-	-	3,185,476
CO	11	324,683	-	218,654	-	33,460	496	25,948	12,158	615,398
CT	8	726,389	-	158,023	24,337	-	-	1,417	37,462	947,627
DC	2	166,046	-	78,462	-	-	-	-	-	244,508
DE	3	89,983	-	19,608	-	-	1,789	-	-	111,381
FL	15	915,878	273,485	164,101	444	23	10,756	-	11,596	1,376,283
GA	5	448,750	-	406,454	-	15,737	-	-	40,557	911,498
HI	1	103,423	-	-	-	-	-	-	-	103,423
IA	7	350,122	73,719	-	25,185	7,590	365	-	25,752	482,734
ID	4	106,222	-	102,470	-	2,548	-	-	-	211,240
IL	9	553,006	382,827	139,281	317,461	41,642	17,262	-	84,931	1,536,410
IN	5	499,674	-	121,885	-	-	-	-	4,825	626,384
KS	7	330,269	52,319	-	121,139	34,917	-	-	15,407	554,051
KY	6	396,571	-	82,933	5,671	-	-	-	32,360	517,535
LA	5	422,535	-	9,319	-	11,964	-	-	-	443,818
MA	8	854,364	106,343	-	-	2,224	-	-	11,942	974,873
MD	8	690,518	106,582	64,255	31,625	33,625	-	-	4,900	931,505
ME	4	317,333	-	25,475	5,144	-	-	-	-	347,952
MI	4	443,469	-	146,340	-	15,244	-	-	-	605,052
MN	5	1,027,660	340,061	-	531,049	-	-	-	96,187	1,994,956
MO	9	536,528	-	99,910	12,336	1,513	2,069	-	-	652,357
MS	6	43,724	-	133,579	45,998	-	-	19,605	18,274	261,180
MT	6	87,388	-	37,493	-	2,086	-	3,475	-	130,443
NC	4	574,101	-	241,873	-	64,321	-	-	-	880,295
ND	5	132,296	-	4,591	-	265	-	-	-	137,152
NE	5	210,668	-	72,104	-	19,892	-	-	669	303,333
NH	4	189,797	44,853	-	-	-	-	-	18,648	253,299
NJ	5	689,868	-	219,571	10,940	-	551	-	25,347	946,277
NM	6	278,145	-	34,800	-	1,789	258	-	-	314,992
NV	4	78,280	8,648	272	3,354	-	-	-	-	90,553
NY	9	5,469,159	-	58,123	-	45,736	-	-	122,031	5,695,048
OH	8	1,236,598	-	471,309	253,039	-	-	-	-	1,960,947
OK	5	271,994	-	194,377	-	2,742	-	-	-	469,112
OR	6	638,045	-	351,401	-	1,072	-	-	-	990,517
PA	9	1,757,595	667,492	-	191,659	26,229	3,127	-	47,451	2,693,554
SC	6	258,653	-	134,810	1,608	5,585	4,683	-	26,894	432,233
SD	4	100,113	9,519	-	4,342	-	-	-	-	113,974
TN	3	600,438	-	-	-	-	-	-	-	600,438
TX	7	1,078,878	-	300,918	-	98,609	-	-	-	1,478,404
UT	6	148,989	3,969	25,088	2,010	2,540	-	-	2,899	185,493
VA	7	602,412	-	480,477	32,652	-	570	-	-	1,116,112
WA	9	741,817	-	519,669	-	5,589	-	-	-	1,267,075
WI	11	720,638	-	848,461	-	84,949	-	57	7,297	1,661,401
WV	2	298,948	-	127,659	-	-	-	-	-	426,607
WY	6	62,820	-	12,178	-	10,472	-	-	5,061	90,530

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.

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, 2012 (\$)

	Total No. of Waivers	I/DD	Aged (≥ 65)	Aged/ Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total Expenditures Per Person
Avg.	290	47,522	11,490	11,834	20,904	13,930	3,858	12,436	38,229	27,232
AK	4	72,162	26,048	-	26,158	43,483	-	-	-	41,674
AL	6	51,720	-	11,946	11,918	-	6,955	-	-	26,950
AR	4	42,551	8,712	14,284	16,557	-	-	-	-	19,764
CA	7	31,824	-	4,593	44,724	5,617	4,265	-	-	28,608
CO	11	42,167	-	9,692	-	16,873	8,552	8,643	47,122	17,305
CT	8	78,690	-	12,263	25,351	-	-	17,071	89,838	40,193
DC	2	98,339	-	26,883	-	-	-	-	-	53,072
DE	3	100,540	-	11,179	-	-	3,122	-	-	34,569
FL	15	30,366	9,773	8,506	3,764	4,540	1,466	-	32,392	16,144
GA	5	37,207	-	10,895	-	33,717	-	-	38,089	17,908
HI	1	39,916	-	-	-	-	-	-	-	39,916
IA	7	29,831	6,670	-	6,574	-	9,117	-	18,991	16,629
ID	4	32,684	-	10,506	-	-	-	-	-	15,841
IL	9	31,442	7,910	15,274	14,626	18,240	12,216	-	17,654	14,589
IN	5	36,675	-	12,079	-	-	-	-	25,264	26,201
KS	7	38,691	7,761	-	18,285	6,171	-	-	24,889	19,662
KY	6	39,276	-	7,431	101,264	-	-	-	83,835	23,850
LA	5	40,931	-	11,108	-	8,902	-	-	-	35,488
MA	8	74,997	7,983	-	-	-	-	-	70,108	38,937
MD	8	53,235	30,142	14,626	45,989	29,600	-	-	94,234	40,899
ME	4	75,682	-	17,132	32,974	-	-	-	-	59,622
MI	4	54,435	-	13,431	-	21,736	-	-	-	30,646
MN	5	63,340	11,602	-	26,817	-	-	-	69,903	29,903
MO	9	48,541	-	5,749	31,549	9,457	17,389	-	-	22,417
MS	6	23,724	-	8,092	17,989	-	-	25,232	22,258	11,605
MT	6	33,164	-	14,843	-	12,130	-	18,007	-	23,605
NC	4	51,783	-	18,499	-	46,374	-	-	-	34,456
ND	5	35,266	-	12,081	-	-	-	-	-	32,911
NE	5	47,267	-	12,071	-	47,513	-	-	31,873	27,906
NH	4	43,048	13,069	-	-	-	-	-	94,502	31,511
NJ	5	63,759	-	16,435	36,631	-	2,315	-	73,898	37,761
NM	6	69,711	-	12,232	-	11,849	36,908	-	-	45,044
NV	4	44,126	3,934	7,761	5,753	-	-	-	-	19,728
NY	9	78,139	-	2,041	-	12,066	-	-	43,469	54,203
OH	8	40,105	-	10,439	20,721	-	-	-	-	22,234
OK	5	55,071	-	8,761	-	8,874	-	-	-	17,100
OR	6	45,417	-	10,709	-	3,367	-	-	-	20,994
PA	9	60,707	20,378	-	20,635	4,361	8,986	-	73,681	34,532
SC	6	45,402	-	9,086	35,738	13,443	4,473	-	37,232	18,988
SD	4	30,390	6,684	-	32,563	-	-	-	-	23,492
TN	3	75,574	-	-	-	-	-	-	-	75,574
TX	7	35,647	-	11,822	-	15,869	-	-	-	23,871
UT	6	33,774	7,377	19,508	15,702	19,689	-	-	27,606	28,116
VA	7	61,761	-	17,349	79,834	-	11,872	-	-	29,444
WA	9	37,503	-	13,370	-	37,011	-	-	-	21,549
WI	11	30,017	-	22,670	-	14,099	-	9,427	44,222	24,566
WV	2	68,792	-	20,286	-	-	-	-	-	40,100
WY	6	46,089	-	6,823	-	12,078	-	-	27,064	21,545

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.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 8: Medicaid § 1915(c) HCBS Waiver Participants, by Service and State, 2012

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Total	535,124	831,588	549,402	242,670	222,357	1,527,636
AK	4,948	3,022	3,718	441	-	5,285
AL	9,123	7,764	6,923	1,580	-	20,841
AR	6,656	9,229	352	501	953	18,989
CA	15,938	49,747	51,727	16,885	33,858	83,016
CO	1,235	18,155	16,653	2,956	4,808	44,032
CT	12,863	4,513	9,506	1,341	266	48,594
DC	2,361	1,521	1,329	261	-	3,162
DE	1,312	1,340	1,495	204	1,093	852
FL	86,931	39,910	22,859	15,970	20,252	110,063
GA	11,625	19,758	8,251	351	22,071	25,143
HI	-	2,313	2,011	53	-	356
IA	11,895	16,596	5,650	847	10,650	39,385
ID	717	5,632	4,144	5,391	4,783	12,584
IL	5,375	30,820	26,932	8,244	9,119	81,021
IN	17,951	10,528	31,254	12,825	971	29,464
KS	3,426	26,974	10,063	497	-	23,186
KY	33,584	13,978	11,429	6,765	5,496	13,672
LA	3,968	2,936	2,920	87	103	13,422
MA	-	9,146	11,027	596	2,223	24,875
MD	13,549	6,946	23,878	2,394	2,644	10,190
ME	1,619	6,798	3,384	190	-	4,037
MI	-	8,794	365	2,165	4,230	34,897
MN	40,342	19,658	23,925	601	4,994	67,917
MO	240	12,260	8,027	1,727	222	28,369
MS	19,327	10,100	2,034	580	423	30,051
MT	3,283	2,499	4,593	799	68	9,617
NC	13,948	37,443	7,945	929	24	19,476
ND	469	935	2,537	9	134	2,545
NE	-	409	6,162	175	2,590	9,766
NH	2,835	5,771	1,768	2,000	788	5,115
NJ	22,713	18,965	8,174	712	3,742	8,235
NM	5,337	3,392	2,689	15,713	2,977	5,778
NV	2,737	268	3,205	651	626	4,254
NY	8,515	21,123	87,284	1,426	1,551	68,261
OH	-	75,334	17,191	6,613	5,952	162,647
OK	23,875	22,860	4,730	23,913	1,374	54,262
OR	6,453	18,558	126	54	28,234	31,643
PA	45,259	63,726	39,402	8,016	787	92,259
SC	16,207	15,300	7,752	605	6	45,715
SD	3,507	589	4,107	2,462	996	5,961
TN	6,397	6,324	7,976	5,898	986	8,345
TX	5,048	38,249	23,081	56,985	11,769	92,815
UT	6,875	3,498	4,149	2,317	1,239	12,286
VA	13,973	59,340	6,225	1,409	61	6,285
WA	-	44,647	2,051	8,503	19,766	50,925
WI	28,542	46,307	6,975	3,943	9,354	35,986
WV	9,864	4,876	8,889	14,647	-	17,454
WY	4,302	2,737	2,535	1,439	174	4,603

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.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 9: Medicaid § 1915(c) HCBS Waiver Expenditures, by Service and State, 2012
 (\$, in thousands)

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Total	881,231	11,521,922	15,429,872	930,420	5,009,625	5,430,290
AK	12,103	53,057	124,159	3,494	-	20,187
AL	28,359	41,319	258,922	3,477	-	58,120
AR	7,029	214,600	2,944	263	13,510	51,008
CA	38,581	236,627	939,752	242,964	1,382,866	344,431
CO	1,058	177,943	307,239	26,203	44,664	64,974
CT	18,760	80,112	564,535	2,086	4,146	277,950
DC	1,877	30,868	18,654	465	-	9,212
DE	2,774	16,040	17,191	36	67,896	7,443
FL	87,965	295,974	443,258	68,784	177,328	208,659
GA	17,339	92,281	14,044	4,695	273,676	28,283
HI	-	63,382	36,136	1,839	-	2,066
IA	13,765	86,626	33,293	2,566	270,998	75,485
ID	665	39,006	91,809	1,674	56,584	21,501
IL	7,485	434,860	513,422	8,389	139,281	439,539
IN	10,654	87,074	421,712	32,211	16,906	50,415
KS	589	287,636	278,765	1,499	-	12,876
KY	39,737	114,632	101,292	40,117	190,491	31,306
LA	5,587	13,241	20,465	7,609	618	396,297
MA	-	64,520	643,313	386	32,142	78,384
MD	19,119	103,613	670,934	6,789	29,997	73,175
ME	1,270	281,747	53,263	213	-	11,459
MI	-	55,440	2,214	9,122	35,211	453,690
MN	62,368	245,665	861,561	2,630	303,828	411,431
MO	171	356,573	188,268	12,930	742	93,232
MS	49,682	106,597	17,987	5,710	4,028	76,672
MT	8,437	14,082	90,301	1,974	1,265	14,383
NC	21,622	494,954	206,254	32,906	58	23,596
ND	339	12,618	96,940	5	3,169	9,075
NE	-	1,763	166,197	1,117	29,908	80,214
NH	8,253	112,253	31,009	4,043	9,500	14,007
NJ	31,765	598,765	132,658	22,877	65,433	10,765
NM	15,695	111,141	30,700	24,900	87,532	45,089
NV	1,509	1,729	77,648	380	5,163	3,386
NY	54,820	180,782	5,116,139	3,965	13,377	311,454
OH	-	1,347,985	166,478	39,913	87,788	318,784
OK	59,877	184,035	99,468	12,833	24,107	102,420
OR	14,658	173,294	655	76	658,988	94,568
PA	89,595	819,113	1,458,569	85,628	7,928	218,807
SC	11,307	111,171	195,703	7,190	45	59,895
SD	8,688	3,167	67,441	6,575	8,349	14,185
TN	18,765	567,654	129,877	36,765	19,877	46,876
TX	9,909	361,036	240,145	52,614	400,718	413,981
UT	13,568	15,876	106,977	2,588	20,988	28,228
VA	5,761	949,131	89,268	41,692	674	29,586
WA	-	914,193	7,668	13,174	272,637	78,193
WI	54,274	935,377	62,876	30,988	245,454	86,654
WV	16,765	18,988	176,543	18,987	-	121,657
WY	8,688	13,381	55,225	3,079	1,757	6,690

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.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 10: Medicaid § 1915(c) HCBS Waiver Expenditures Per Participant Served, by Service and State, 2012 (\$)

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Avg.	1,647	13,855	28,085	3,834	22,530	3,555
AK	2,446	17,557	33,397	7,917	-	3,820
AL	3,108	5,322	37,400	2,201	-	2,789
AR	1,056	23,253	8,363	525	14,176	2,686
CA	2,421	4,757	18,168	14,389	40,843	4,149
CO	857	9,801	18,449	8,864	9,290	1,476
CT	1,458	17,751	59,387	1,555	15,588	5,720
DC	795	20,295	14,036	1,782	-	2,913
DE	2,114	11,970	11,499	177	62,119	8,736
FL	1,012	7,416	19,391	4,307	8,756	1,896
GA	1,491	4,671	1,702	13,375	12,400	1,125
HI	-	27,402	17,969	34,705	-	5,804
IA	1,157	5,220	5,893	3,029	25,446	1,917
ID	928	6,926	22,155	310	11,830	1,709
IL	1,393	14,110	19,064	1,018	15,274	5,425
IN	593	8,271	13,493	2,512	17,411	1,711
KS	172	10,663	27,702	3,016	-	555
KY	1,183	8,201	8,863	5,930	34,660	2,290
LA	1,408	4,510	7,009	87,460	6,000	29,526
MA	-	7,054	58,340	647	14,459	3,151
MD	1,411	14,917	28,098	2,836	11,345	7,181
ME	784	41,446	15,740	1,122	-	2,838
MI	-	6,304	6,067	4,213	8,324	13,001
MN	1,546	12,497	36,011	4,376	60,839	6,058
MO	714	29,084	23,454	7,487	3,342	3,286
MS	2,571	10,554	8,843	9,845	9,522	2,551
MT	2,570	5,635	19,661	2,471	18,609	1,496
NC	1,550	13,219	25,960	35,421	2,408	1,212
ND	724	13,495	38,211	610	23,651	3,566
NE	-	4,309	26,971	6,382	11,548	8,214
NH	2,911	19,451	17,539	2,021	12,056	2,738
NJ	1,399	31,572	16,229	32,130	17,486	1,307
NM	2,941	32,766	11,417	1,585	29,403	7,804
NV	551	6,451	24,227	583	8,247	796
NY	6,438	8,559	58,615	2,781	8,625	4,563
OH	-	17,893	9,684	6,036	14,749	1,960
OK	2,508	8,051	21,029	537	17,545	1,888
OR	2,271	9,338	5,197	1,401	23,340	2,989
PA	1,980	12,854	37,018	10,682	10,073	2,372
SC	698	7,266	25,245	11,885	7,525	1,310
SD	2,477	5,378	16,421	2,671	8,382	2,380
TN	2,933	89,762	16,283	6,233	20,159	5,617
TX	1,963	9,439	10,404	923	34,049	4,460
UT	1,973	4,539	25,784	1,117	16,939	2,298
VA	412	15,995	14,340	29,590	11,047	4,707
WA	-	20,476	3,738	1,549	13,793	1,535
WI	1,902	20,199	9,015	7,859	26,241	2,408
WV	1,700	3,894	19,861	1,296	-	6,970
WY	2,020	4,889	21,785	2,139	10,096	1,453

NOTES: “Other Services” include assistance with chores, meals, transportation, etc. A dash indicates that the service was not offered in a § 1915(c) waiver.

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, 2014

	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%	-	-	-	-	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%	-	-	-	-	-
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%	-	300%	-	-	-
UT	300%	100%	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 2014, 300 percent of the SSI FBR was \$2,163 per month. Arizona, Rhode Island, and Vermont are excluded from the table because the states did not operate any § 1915(c) waivers in 2014 (all HCBS were provided through a § 1115 waiver). A dash indicates that there was no operational § 1915(c) waiver for the target enrollment group.

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, 2014

	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	-	-	-	-	C, S	Y
AR	CN, MN	S	-	CN	S	Y	S	Y
AZ	CN	C	-	-	-	-	-	-
CA	CN, MN	S	Y	CN, MN	S	Y	C, S, G	Y
CO	CN, MN	-	Y	-	-	-	C, G	Y
CT	CN, MN	C, S	-	-	-	-	C	Y
DC	CN, MN	S	-	CN	S	-	S	-
DE	CN	S	-	CN, MN	-	-	-	-
FL	CN, MN	C	-	CN, MN	S	Y	C, S, G	Y
GA	CN, MN	S	-	-	-	-	-	-
HI	CN, MN	-	-	-	-	-	-	Y
IA	CN, MN	S	-	-	-	-	C	Y
ID	CN	S	-	CN	S	Y	C	Y
IL	CN, MN	-	-	-	-	-	C	Y
IN	CN, MN	-	-	-	-	-	C	Y
KS	CN, MN	-	-	CN, MN	-	Y	S	Y
KY	CN, MN	S	-	-	-	-	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	C	Y	C, S	Y
ME	CN, MN	-	-	CN, MN	-	-	S	-
MI	CN, MN	S	Y	CN, MN	-	-	S, G	Y
MN	CN, MN	S	-	CN, MN	S	Y	C	Y
MO	CN	S	-	CN	C	Y	C, G	Y
MS	CN	S	-	-	-	-	C, S	Y
MT	CN, MN	-	-	CN, MN	S	Y	C, S, G	Y
NC	CN, MN	-	-	CN, MN	S	-	C, S, G	Y
ND	CN, MN	C	Y	CN, MN	S	Y	C	Y
NE	CN, MN	C	Y	CN, MN	S	Y	-	Y
NH	CN, MN	-	-	CN, MN	-	Y	-	-
NJ	CN, MN	-	-	CN, MN	S	Y	C, S	Y
NM	CN	-	-	CN	-	-	C	Y
NV	CN	S	-	CN	S	Y	C, G	Y
NY	CN, MN	S	-	CN, MN	-	Y	S	Y
OH	CN	S	-	-	-	-	C, S, G	Y
OK	CN	S	-	CN	-	-	C, S	Y
OR	CN	S	-	CN	S	Y	C	Y
PA	CN, MN	S	-	-	-	-	C	Y
RI	CN, MN	S	-	CN, MN	-	-	-	-
SC	CN	S	-	-	-	-	C, S	Y
SD	CN	-	Y	CN	S	Y	C, S	Y
TN	CN, MN	S	-	-	-	-	C, S	Y
TX	CN, MN	-	Y	CN, MN	S	Y	C, S, G	Y
UT	CN, MN	-	-	CN, MN	S	Y	-	Y
VA	CN, MN	S	-	-	-	-	S	Y
VT	CN, MN	-	-	CN, MN	-	Y	-	-
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	-	-	-	-	-	C, S	Y

NOTES: CN – Categorically Needy; MN – Medically Needy; 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.

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, 2014

	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total
Total No. of Waivers	101	18	60	24	50	11	4	25	293
No. of Waiver Enrollment Slots	677,858	163,842	598,379	90,387	48,749	15,840	3,942	18,684	1,617,681
(% of row total)	(42%)	(10%)	(37%)	(6%)	(3%)	(1%)	(<1%)	(1%)	(100%)
No. of Waiting Lists	66	4	24	13	27	2	1	17	154
No. of Persons on Waiting Lists	349,511	19,004	136,693	14,128	58,635	64	25	4,006	582,066
(% of row total)	(60%)	(3%)	(23%)	(2%)	(10%)	(<1%)	(<1%)	(1%)	(100%)
No. of Waiting Lists that Screen for Eligibility	45	2	15	7	22	2	1	11	105
(% of waiting lists for group)	(68%)	(50%)	(63%)	(54%)	(81%)	(100%)	(100%)	(65%)	(68%)
No. of Waiting Lists that Prioritize Certain Clients	48	3	20	9	17	1	1	14	113
(% of waiting lists for group)	(73%)	(75%)	(83%)	(69%)	(63%)	(50%)	(100%)	(82%)	(73%)
No. of Waiting Lists With Enrollees Receiving Non-Waiver Services	60	4	23	12	24	2	1	15	141
(% of waiting lists for group)	(91%)	(100%)	(96%)	(92%)	(89%)	(100%)	(100%)	(88%)	(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, 2014

	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total
Total No. of Waiting Lists	66	4	24	13	27	2	1	17	154
AK	982	0	-	0	0	-	-	-	982
AL	Unknown	-	2,500	110	-	0	-	-	2,610
AR	2,955	0	-	0	52	-	-	-	3,007
CA	0	-	2,277	1,344	5	34	-	-	3,660
CO	3,232	-	0	-	554	0	0	10	3,796
CT	844	-	0	800	334	-	0	100	2,078
DC	0	-	0	-	-	-	-	-	0
DE	0	-	-	-	-	-	-	-	0
FL	20,856	-	55,519	0	0	0	-	375	76,750
GA	10,364	-	763	-	0	-	-	115	11,242
HI	0	-	-	-	-	-	-	-	0
IA	0	0	-	5,683	2,012	0	-	1,080	8,775
ID	0	-	0	-	0	-	-	-	0
IL	15,751	0	0	0	13,674	0	-	0	29,425
IN	5,112	-	0	-	-	-	-	183	5,295
KS	2,414	0	-	2,771	256	-	-	0	5,441
KY	5,827	-	0	0	-	-	-	451	6,278
LA	14,578	-	19,616	-	7,298	-	-	-	41,492
MA	0	0	-	-	0	-	-	0	0
MD	3,210	18,369	0	1,200	4,313	-	-	37	27,129
ME	1,356	-	1,000	-	-	-	-	-	2,356
MI	0	-	14,040	-	0	-	-	-	14,040
MN	3,548	0	-	848	-	-	-	424	4,820
MO	656	-	0	0	28	0	-	-	684
MS	1,714	-	4,861	1,259	-	-	0	9	7,843
MT	844	-	338	-	91	-	25	-	1,298
NC	17,500	-	4,365	-	191	-	-	-	22,056
ND	0	-	0	0	0	-	-	-	0
NE	1,299	-	0	-	-	-	-	0	1,299
NH	0	0	-	-	-	-	-	-	0
NJ	0	-	0	-	-	0	-	50	50
NM	14,239	-	5,000	-	30	0	-	-	19,269
NV	739	448	-	84	-	-	-	-	1,271
NY	0	-	0	-	Unknown	-	-	0	0
OH	59,708	-	0	-	-	-	-	-	59,708
OK	6,920	0	13	-	-	-	-	-	6,933
OR	0	-	0	-	0	-	-	-	0
PA	18,308	0	-	-	-	0	-	108	18,416
SC	1,296	-	3,700	2	404	30	-	224	5,656
SD	23	0	-	-	-	-	-	-	23
TN	7,165	-	0	-	-	-	-	-	7,165
TX	115,913	-	20,221	-	27,012	-	-	-	163,146
UT	1,802	187	0	27	70	-	-	86	2,172
VA	7,779	-	0	0	-	-	-	-	7,779
WA	1,283	-	0	-	67	-	-	-	1,350
WI	675	-	675	-	1,938	-	-	675	3,963
WV	383	-	1,805	-	-	-	-	0	2,188
WY	236	-	0	-	306	-	-	79	621
Total No. of Enrollees	349,511	19,004	136,693	14,128	58,635	64	25	4,006	582,066
Avg. Waiting Period (in months)	47	13	14	19	26	3	4	20	29

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.

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, 2014 (\$)**

	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	-	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	17.90	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	15.72	-
IL	59.68	-	-	Not offered	Not offered
IN	35.82/day	42.82	20.71/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	8.00	-
MA	-	86.99	24.40/hour	-	14.72
MD	-	121.03	59.28	35.34/day	35.34/day
ME	16.55/hour	-	-	26.00	-
MI	-	80.98	51.72	14.00	8.00
MN	53.75	32.52/hour	54.29	16.32	16.00
MO	64.15	64.15	64.15	18.16	15.80
MS	75.85	-	-	Not offered	Not offered
MT	73.10	73.10	32.64	18.16	-
NC	103.33	109.60	47.28	13.88	-
ND	115.42	115.42	115.42	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/hour	22.76/hour	12.00/hour	Not offered	Not offered
OK	51.48	70.87	32.09	15.68	-
OR	-	175.98	63.21	19.94	10.20
PA	88	-	-	Not offered	Not offered
RI	64.50	64.50	-	19.46	-
SC	-	72.65	39.13	Not offered	Not offered
SD	-	36.01/hour	32.32/hour	18.00	-
TN	-	-	-	Not offered	Not offered
TX	200.00	98.92	46.09	11.50	-
UT	-	-	-	16.78	11.64
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	92.69	87.46	54.14	18.73	13.02

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 Eiken, S., Sredl, K., Burwell, B., and Saucier, P. *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2013*, at 7, Truven Health Analytics (June 2015), available at <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-fy2013.pdf>.

² Minnesota has a Section 1115 waiver that offers some fee-for-service HCBS, including Section 1915(i) and Community First Choice services.

³ Eiken, S., Sredl, K., Burwell, B., and Saucier, P. *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2013*, at 7, Truven Health Analytics (June 2015), available at <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-fy2013.pdf>.

⁴ *Olmstead v. L.C.*, 527 U.S. 581 (1999), available at <http://www.law.cornell.edu/supct/html/98-536.ZS.html>. For a discussion of *Olmstead's* legacy, including legal case trends and policy developments in the last five years, see 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* (June 2014), available at <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 Eiken, S., Sredl, K., Burwell, B., and Saucier, P. *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2013*, at 5, Truven Health Analytics (June 2015), available at <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-fy2013.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* (Oct. 2015), available at <http://kff.org/medicaid/report/money-follows-the-person-a-2015-state-survey-of-transitions-services-and-costs/>.

⁷ BIP funding expired on September 30, 2015. For more information, see Kaiser Commission on Medicaid and the Uninsured, *Medicaid Balancing Incentive Program: A Survey of Participating States* (June 2015), available at <http://kff.org/medicaid/report/medicaid-balancing-incentive-program-a-survey-of-participating-states/>.

⁸ Kaiser Commission on Medicaid and the Uninsured, *Implementing the ACA: Medicaid Spending & Enrollment Growth for FY 2014 and FY 2015* at 4 (Oct. 2014), available at <http://kff.org/medicaid/report-section/implementing-the-aca-medicaid-spending-enrollment-growth-issue-brief>.

⁹ Eiken, S., Sredl, K., Burwell, B., and Saucier, P. *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2013*, at 7, Truven Health Analytics (June 2015), available at <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-fy2013.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* (June 2011), available at <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 now 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 Expenditure data from Eiken, S., Sredl, Burwell, B., and Saucier, P. *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2013*, Truven Health Analytics (June 2015), available at <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-fy2013.pdf>; participant data from Rhode Island Executive Office of Health and Human Services, *Global Waiver Quarterly Report, January – March 2013*, available at http://www.eohhs.ri.gov/Portals/o/Uploads/Documents/Quarterly%20Global%20Wavier%20Report%20January%20-%20March%20202013_1.pdf; State of Vermont Agency of Human Services, *Global Commitment to Health, Quarterly Report* (November 2012), available at <http://dvha.vermont.gov/global-commitment-to-health/gc-ffv12-qtr-4-report.pdf>. Arizona participation counts as reported by state officials to KCMU and UCSF, 2015.

¹⁴ Minnesota has a Section 1115 waiver that offers some fee-for-service HCBS, including Section 1915(i) and Community First Choice services.

¹⁵ Medicaid.gov, *Waivers*, available at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/Home-and-Community-Based-1915-c-Waivers.html>.

¹⁶ For more information about Medicaid managed care, see generally Kaiser Commission on Medicaid and the Uninsured, *Medicaid and Managed Care: Key Data, Trends, and Issues* (Feb. 2012), available at <http://kff.org/medicaid/issue-brief/medicaid-and-managed-care-key-data-trends/>; see also Kaiser Commission on Medicaid and the Uninsured, *Key Themes in Capitated Medicaid Managed Long-Term Services and Supports Waivers* (Nov. 2014), available at <http://kff.org/medicaid/issue-brief/key-themes-in-capitated-medicaid-managed-long-term-services-and-supports-waivers/>. In addition, Kansas has a combination § 1115/1915(c) waiver

managed LTSS; for more information, see Kansas KanCare Waiver (11-W- 00283/7)), State of Kansas “KanCare” Section 1115 Demonstration Application, August 6, 2012, accessed Sept. 10, 2015, available at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/1115/downloads/ks/KanCare/ks-kancare-1115-demo-app-08062012.pdf>.

¹⁷ U.S. Dep’t of Labor, *Information on the Final Rule: Application of the Fair Labor Standards Act to Domestic Service*, available at <http://www.dol.gov/whd/homecare/finalrule.htm>. While the new rules were to be effective in January, 2015, they have not yet been enforced and 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), available at <http://www.dol.gov/whd/homecare/0821appealdecision.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 becomes 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*, available at http://www.dol.gov/whd/homecare/non-enforcement_policy.htm; see also 80 *Fed. Reg.* 55029 (Sept. 14, 2015), available at <http://www.gpo.gov/fdsys/pkg/FR-2015-09-14/pdf/2015-23092.pdf>; CMS Informational Bulletin, *Self-Direction Program Options for Medicaid Payments in the Implementation of the Fair Labor Standards Act Regulation Changes* (July 3, 2014), available at <http://www.medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-07-03-2014.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), available at http://www.ada.gov/olmstead/documents/doj_hhs_letter.pdf.



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