

FAB 8 - MEDICAID & MED
WAIVER - STATUS

SIGNIFICANT 1115 WAIVERS

SIGNIFICANT MEDICAID WAIVERS

SECTION 1115 OF THE SOCIAL SECURITY ACT

ARIZONA - Statewide Managed Care - Approved 1982

Arizona is the only State which operates its entire Medicaid program under 1115 demonstration authority. This statewide Medicaid managed care program incorporates both acute and long term care services under a capitated payment system. Provider contracts are obtained through a competitive bidding process.

Status: Operational; waivers expire September, 1994

DELAWARE - Primary Care for Children - Approved July 1993

Delaware's Health Care Partnership for Children is a public/private partnership between Delaware and Nemours Foundation to develop a capitated managed care system of pediatric practices/clinics for Medicaid-eligible children aged 0 to 17. Delaware had recently expanded Medicaid eligibility under a State Plan Amendment, and proposed this project as a means of ensuring access for the additional population. Thirteen clinics in three counties will be established to provide the basic Medicaid benefit package.

Status: Implementation begins August 1993

FLORIDA - Statewide Health Reform - Proposal Not Yet Received

Florida's 1993 health reform legislation calls for establishing a managed competition style financing and delivery system for Medicaid, and expanded coverage to the uninsured. The State will be divided into 11 regional Community Health Purchasing Alliances (CHPAs) to provide health benefits through various managed care models. Florida's Agency for Health Care Administration is in the process of establishing local Boards to govern the CHPA's and oversee the implementation of the delivery system.

Status: Introductory meeting with State officials May 1993; State to schedule follow-up meeting(s) before submitting proposal. Proposal expected September-October 1993.

HAWAII - Statewide Health Reform - Approved July 1993

Hawaii's Health QUEST program will provide seamless coverage for those on public programs (both Medicaid and State-only programs), as well as the State's 2 percent uninsured, by creating one large

public purchasing pool to arrange for health care through capitated managed care plans, and by expanding Medicaid eligibility to 300 percent of the Federal Poverty Level.

Status: Implementation targeted April 1994; developmental activities underway.

IOWA - Transfer of Assets - Proposal Received April 1993 (pending)

Iowa proposes more rigorous transfer of assets restrictions for nursing home applicants by extending the look-back and penalty periods from 30 to 60 months, as well as other changes related to the penalty provisions. Governor Branstad is supportive of this waiver request. Legislation pending in Congress will likely address some of their requests.

Status: Review process completed; pending decision.

KENTUCKY - Statewide Health Reform - Proposal Received March 1993 (pending)

Kentucky's Health Care Reform proposal would increase coverage for the uninsured by expanding Medicaid to 100 percent of the Federal Poverty Level, and eliminating asset tests and certain categorical requirements. Service delivery would be provided through statewide managed care arrangements with an emphasis on primary care and prevention. Specific cost containment provisions also include global budgeting. Additional comprehensive health reform legislation was sponsored by Governor Jones, but was not passed by the legislature this session.

Status: A decision is targeted for October; the State expects to implement in January 1994.

MARYLAND - Prevention & Primary Care for Children - Approved August 9, 1993

Maryland proposes to expand Medicaid eligibility to uninsured low income children, who would receive a more limited benefit package focused on preventive and primary care. Maryland seeks to demonstrate that access to basic primary care and preventive services will improve health outcomes and be cost effective by reducing emergency room use and later onset of acute and chronic conditions.

Status: Approved August 9. Governor Schaefer had appealed to the White House the week of August 2 to expedite approval of the waiver.

MINNESOTA - Statewide Health Reform - Proposal Not Yet Received

Minnesota recently passed health reform legislation enabling implementation of the Minnesota Health Care Commission's recommendations for reform and cost containment of the MnCare plan. The legislation relies on managed competition style purchasing alliances called Integrated Service Networks (ISNs), global budgets to limit annual growth to 10 percent, and the establishment of an all-payer system for non-ISN services. The State seeks to establish a transparent relationship between MnCare and Medicaid, with uniform application procedures and revised spend down arrangements.

Status: Minnesota is likely to need Medicaid 1115 demonstration waivers to implement MnCare. DHHS/HCFR staff have had informal discussions with Minnesota State staff.

OREGON - Statewide Health Reform - Approved March 1993

Oregon's plan will provide universal health insurance coverage by expanding Medicaid eligibility to all Oregonians with income below the Federal Poverty Level, through private insurance reform, risk pooling and employer mandates. Cost containment will be achieved through the use of statewide managed care and a revised Medicaid benefit package based on a prioritized list of treatments.

Status: In August 1993 the State legislature authorized funding; implementation expected in February 1994.

RHODE ISLAND - Statewide Medicaid Expansion for Pregnant Women & Children - Proposal Received July 1993 (pending)

Rhode Island's statewide Rite Care Program would expand Medicaid eligibility for pregnant women and children to 250 percent of the Federal Poverty Level. Although a State Plan Amendment has been approved to incorporate eligibility expansions, Rhode Island is requesting demonstration waivers to impose cost sharing, permit participation (and Federal match) for individuals between the ages of 21 and 64 who receive care in Institutions for Mental Disease, and to require all recipients to enroll in managed care plans. Advocacy groups met with HCFA August 3 to express numerous concerns.

Status: A decision will be made in October; the State expects to implement in January, 1994.

SOUTH CAROLINA - Family Planning - Proposal Received June 1993
(pending)

South Carolina proposes to provide Medicaid family planning services to women who give birth while on Medicaid, for two years beyond the 60-day post partum period, regardless of future eligibility status. The State seeks to show that continued coverage of family planning services will reduce the number of unintended pregnancies.

Status: Decision pending - a number of other States (e.g., Missouri, Michigan) have expressed interest in expanding eligibility for family planning services; a concept paper has been received from Missouri.

TENNESSEE - Statewide Health Reform - Proposal Received June 1993
(pending)

The TennCare proposal calls for expanded health coverage to the uninsured by pooling local, State and Federal health care funds to provide health care through managed care networks. Cost containment would be achieved through the use of co-payments for individuals above the Federal Poverty Level, and community-based spending targets. The benefit package would be identical to the State group insurance plan, with the exception of a \$1000 deductible (except for preventive services, and only for those above 200 percent of the Federal Poverty Level). Some unique aspects of this proposal include a "block grant" approach for providing Federal Medicaid funds, incorporating prior year disproportionate share payments, and a proposed cap on enrollment.

Status: A decision will be made by September 17, 1993. We are receiving numerous letters of concern or opposition from Tennessee physicians.

VERMONT - Statewide Health Reform - Proposal Not Yet Received

Comprehensive reform legislation was enacted in 1992 creating the Vermont Health Care Authority (VHCA). The VHCA was charged with submitting to the State legislature by November 1993 two universal designs; one based on a single-payer concept, and the other on a regulated multiple payer model. The reform legislation also calls for the establishment of purchasing pools for health care services and equipment, small business reforms, and implementation of global budgeting.

Status: Vermont officials will meet with HCFA staff September 22, prior to submitting a proposal.

WASHINGTON - Statewide Health Reform - Proposal Not Yet Received

Washington enacted health reform legislation this session which guarantees health insurance for all State residents by 1997, through the expansion of the State-subsidized Basic Health Plan, and Medicaid expansions. The legislation also provides for basic coverage for the uninsured, authorizes up to 10 health insurance cooperatives, and requires employers to contribute to health insurance premiums.

Status: Washington is likely to need Medicaid 1115 demonstration waivers in order to implement their reform legislation; State staff have been in contact with HCFA's Regional Office.

ALL 1115 WAIVERS

STATUS OF OTHER STATE MEDICAID INITIATIVES

August 10, 1993

STATE	INITIAL CONTACT/ CONCEPT DISCUSSIONS	PROPOSAL RECEIVED/ TECHNICAL REVIEW	CLEARANCE/ DECISION	AWARD ANNOUNCEMENT/ ACCEPTANCE OF T&Cs	OPERATIONAL DEVELOPMENT	OPERATIONAL START
DE				X	X	
MD				X	X	
SC		X				(10/93)
IA		X				
RI		X				
MO	X					
DC	X					
MD	X					
OH	X					
CT	X					
TX	X					
DC	X					
AR	X					
MN	X					
NH	X					
CA	X					

**Dates in parentheses represent expected dates.

**SECTION 1115 WAIVER ACTIVITY
OTHER MEDICAID INITIATIVES**

STATE	INITIATIVE	KEY DATES	COMMENTS
APPROVED			
DELAWARE	Proposal requests waivers to allow Delaware to develop a public-private managed care system which enrolls, on a capitated basis, Medicaid-eligible children in pediatric clinics. The Nemours Foundation will develop and maintain the clinics & will subsidize a portion of the costs.	<u>Waivers approved 7/27/93</u>	
MARYLAND	Maryland has requested waivers of Medicaid eligibility to establish a preventive and primary care program for children under the Medicaid program.	<u>Waivers approved 8/9/93</u>	

**SECTION 1115 WAIVER ACTIVITY
OTHER MEDICAID INITIATIVES**

STATE	INITIATIVE	KEY DATES	COMMENTS
RECEIVED			
S. CAROLINA	Proposal seeks waivers to extend Medicaid family planning services to Medicaid-eligible pregnant women beyond the 60-day post partum period.	<p>Rec'd proposal 12/92</p> <p>Out of cycle review panel held 2/25/93</p> <p>Rec'd revised proposal 6/23/93</p>	<p>HCFA staff has requested further information and clarification of the proposal. A revised proposal was received June 23.</p>
IOWA	Proposal requests waivers of the transfer to assets requirements. Iowa wants to extend the look-back and penalty periods from 30 to 60 months, as well as implement other changes related to the penalty periods.	<p>Rec'd proposal 4/5/93</p> <p>Panel held 6/2/93</p> <p>Mtg. w/Dep. Sec'y & HHS/HCFA staff 6/10</p>	<p>HCFA has held several internal meetings on the transfer of assets issue, and held several discussions with Iowa in the Fall on this issue. Letters of support have been received from Gov. Branstad and Sen. Harkins.</p> <p>A decision memo is being prepared for the HCFA Administrator.</p>
RHODE ISLAND	Proposal would request Medicaid waivers in order to extend Medicaid eligibility to pregnant women and children up to 250% FPL, with recipients enrolled in a capitated managed care delivery system.	<p>DRAFT Proposal Rec'd 6/23</p> <p>Conference call w/RI & HCFA 7/1</p> <p>Proposal Rec'd 7/2</p> <p>State expects a decision by 10/93</p>	<p>HCFA/ORD held a conference call w/RI to discuss technical issues.</p> <p>RI seeks to phase-in implementation by 4/94. RI expects a decision by October 1993. HCFA received proposal 7/20. Meeting with Governor Sundlun and Secretary 7/20.</p> <p><u>HCFA staff met with representatives of a R.I. Advocacy Group (D.A.R.E.) to discuss their concerns with the proposal. The most significant issue was related to R.I. failure to seek collaboration and consensus among interested parties in the State. D.A.R.E. strongly expressed their objections to RI's haste in formulating the proposal, and their fear that DHHS/HCFA will also review the proposal under tight timeframes, without allowing interested groups, such as themselves, sufficient time to voice their concerns.</u></p>

STATE	INITIATIVE	KEY DATES	COMMENTS
RECEIVED			
MISSOURI	Proposal would request Medicaid waivers in order to extend Medicaid coverage beyond the two-month post partum period for family planning services.	DRAFT Proposal Rec'd 6/29	Missouri's family planning demonstration seeks to improve birth outcomes among low-income women, by reducing the incidence of low birth-weight deliveries through improved inter-pregnancy spacing.
DISTRICT OF COLUMBIA	Proposal would request funding to implement a project using creative outreach methods and incentives to encourage recipients to receive preventive care.	DRAFT Proposal Rec'd 6/29	NewHealth, Inc. of DC will request funding for this project which would utilize 24-hour nurse counsellors as recipient advocates. HCFA/ORD has held several preliminary mtgs. w/NewHealth to discuss technical issues.

**SECTION 1115 WAIVER ACTIVITY
OTHER MEDICAID INITIATIVES**

STATE	INITIATIVE	KEY DATES	COMMENTS
ANTICIPATED			
MARYLAND	The City of Baltimore submitted to HCFA concept papers for several demonstration projects the City is interested in developing as part of their Urban Agenda. The concepts range from health education targeted to African-American males to comprehensive AIDS centers.	Rec'd concept papers 3/93 Mtg. w/ORD & the Administrator 5/24	HCFA staff is reviewing the concept papers.
OHIO	Provisions of the proposal would include: 1) establish a nursing home tax and establish the availability of community-based care; 2) expand nursing home beds while establishing pre-admission screening; 3) implement a case mgmt. system for mental health and MR/DD populations; 4) allow income and assets disregard for individuals who purchase LTC insurances; and 5) extend assets transfer preclusion from 30 to 60 months for Medicaid eligibility.		Ohio is formulating the details of the proposal and is likely to attempt the project under 1915(b) waivers. Discussions with the regional office indicate Ohio may seek 115 waivers to address the transfer of assets provision, but the State has not yet contacted HCFA.
CONNECTICUT	The State legislature has mandated that the State pursue waivers to conduct a demonstration addressing transfer of assets provisions.		HCFA was contacted in the Fall of 1992 by the State Dept. of Income Maintenance regarding a possible waiver request.
TEXAS	Texas submitted a concept paper in response to ASPE's school based clinics initiatives-"Targeted Comprehensive Learning Readiness Strategy for Children from Low-Income Families." The State expects to eventually submit a 1115 waiver request to waiver comparability and eligibility requirements.		HCFA was contacted in the Fall of 1992 by the State Dept. of Income Maintenance regarding a possible waiver request.
District of Columbia	Proposal will request Medicaid waivers to implement a direct purchase vaccine program.		

STATE	INITIATIVE	KEY DATES	COMMENTS
ANTICIPATED			
ARKANSAS	Anticipate a proposal to request waivers to permit the Child Support Enforcement Unit (CSE) to collect Medicaid payments for a 15 percent incentive. The State hopes to show that CSE will be able to obtain a higher proportion of Medicaid funds that are due to the State, that are a result of court judgement, than could be obtained through the regular Medicaid 3rd party liability units.	State met w/HCFE & ACF 5/11/93	Current regulations prohibit this collection because Arkansas administers the CSE units directly, thus they are considered subsidiaries of the State agency, and not considered political subdivisions of the State.
MINNESOTA	Minnesota intends to submit a waiver request to alter asset transfer provisions by: 60-day look-back; unlimited penalty period; single penalty period for multiple transfer; and a prohibition against transfer of excluded assets.	Informal discussions w/HCFE & MN 6/93	MN is under a State mandate to tighten the asset transfer requirements. An official w/the MN Dept. of Human Resources contacted HCFE/ORD to discuss the waiver application process and research design approaches.
NEW HAMPSHIRE	New Hampshire intends to submit a waiver request to develop Project TOOTH, "The Project Toward Occupational Opportunity Through Health." Project TOOTH will provide comprehensive dental treatment for approximately 200 AFDC/JOBS program participants whose disfiguring dental status is the major impediment to their employment following jobs training. They will be requesting funding and the waiving of comparability requirements to create a group of Medicaid recipients eligible for comprehensive dental care.	Rec'd letter 7/16	<u>HCFE will contact New Hampshire to indicate whether they should submit a formal proposal.</u>
CALIFORNIA	<u>California is proposing a Medi-Cal managed care expansion, to be administered under the Medicaid Bureau's 1915(b) program. Los Angeles and San Francisco Counties would also like to be given 1115 waivers, which would allow them to cover medically indigent through this program.</u>		<u>LA county has been lobbying key Congressmen to try and gain support for their request.</u>

SIGNIFICANT HCBS WAIVERS

SIGNIFICANT MEDICAID

HOME AND COMMUNITY-BASED SERVICES WAIVERS

Description of Home and Community-Based Services Waivers - The home and community-based services (HCBS) waiver program was established by section 2176 of the Omnibus Budget Reconciliation Act of 1981, and incorporated into the Social Security Act at section 1915(c). Under a HCBS waiver, States may provide a broad array of home and community based services (excluding room and board) not otherwise covered under the Medicaid program as an alternative to institutional care. In order to accomplish this, States may request waivers of the requirement that services be available Statewide, and that services be available in equal amount, duration and scope. States may also request waiver of certain eligibility requirements to allow HCBS services to be provided to individuals who would otherwise be eligible for Medicaid only in an institutional setting.

o Alabama (001.90.R2)

Alabama has requested a renewal of its waiver which serves mentally retarded/developmentally disabled individuals. Prior to its receipt we received a letter from Governor Folsom indicating a need to settle a 20 year old Wyatt federal court action by possibly placing 570 individuals from intermediate care facilities for the mentally retarded into the waiver. The State is anxious to have the waiver renewed by October 1, 1993 due to court action. However, we have been informed by our RO that this waiver may violate statutory and regulatory requirements related to free choice of providers, provider agreements and direct payment. We are awaiting specific comments from our RO.

o Colorado (0268)

This waiver request was submitted by Colorado in response to a court order which mandates that the State serve mentally ill persons under a home and community based services waiver. HCFA has requested additional information from the State.

o Connecticut (0140.90.03)

The State of Connecticut has been ordered by the U.S. District Court in Skandalis vs. Rowe to include the "medically needy" in its aged and disabled home and community-based waiver. The court defined "medically needy" under the waiver as individuals whose incomes are less than the nursing facility Medicaid reimbursement rate

needy" under the waiver as individuals whose incomes are less than the nursing facility Medicaid reimbursement rate or if not specifically accepted into a nursing facility, the individuals income should be less than the average Medicaid reimbursement rate for NFs in the State. We believe the amendment, as submitted, does not conform to the medically needy statutory and regulatory provisions for financial eligibility. We will request additional information stating that as submitted, the amendment is not acceptable, but also offer the State an alternative approach that we believe will satisfy the court. However, the State must accept this approach or we will have to disapprove the amendment which runs the risk of making HCFA a party in the suit. The State is appealing the Court's decision, thus, our additional information request will afford the State additional time in the appeals process.

o Massachusetts (0059.92.R1)

Massachusetts originally submitted a request for renewal of its home and community-based services waiver for the aged/disabled on September 30, 1991. Due to the extent and nature of the problems identified in this submittal (and subsequent submittals), the State requested that the 90-day clock be stopped on each of its submittals. The major barriers to approval involve direct payment, provider agreements, and freedom of choice of providers.

HCFA has held several teleconferences with the State to discuss these issues. HCFA believes the State could implement one of the following options which would bring its programs in compliance with statutory and regulatory requirements: (1) to delete case management as a waiver service and provide this service as administration under the State plan; and (2) to provide that HCCs become organized health care delivery systems. We understand the State is considering these options and plans to contact HCFA around the first of September.

o Oregon (60001.90.01)

HCFA's Medicaid Bureau received a request from the State of Oregon to amend the expenditure cap (known as the Aggregate Projected Expenditure Limit--APEL) for its 1915(d) home and community-based services waiver for the elderly for FFY 1990 through FFY 1995. The State needs to document further the alleged increased costs. The State of Oregon is the only State with a 1915(d) waiver program. HCFA has requested additional information from the State.

o Tennessee (0248)

In January 1992 Tennessee requested a new statewide waiver for the elderly and disabled. Our RO informed us that Tennessee was pressured into submitting the waiver by ADAPT, the activist group for the disabled. Our review of the proposal identified numerous problems. Following discussion with the State and the RO, we formally requested additional information on the waiver in March 1992. On July 27, 1993, we received the State's response to our request for additional information.

o Washington (0203.90) - (State stopped 90-day clock on 6/3/93)

The State of Washington has submitted a renewal request of its Alternate Disposition Plan (ADP) waiver 0203 that provides home and community-based services for the developmentally disabled inappropriately placed in nursing facilities. Both HCFA-372 reports and the State's independent assessment indicate that the waiver was not cost-effective for the second year of its 3-year initial term (CY 1991) when the State's actual waiver costs are compared to the State's estimated costs without the waiver. There is a potential denial of this renewal request if the State cannot adequately address the cost-effectiveness issue.

ALL HCBS

HOME AND COMMUNITY-BASED

Alabama 001.90.R2	Renewal-- to provide personal care, habilitation, respite, environmental modifications, skilled nursing, equipment and supplies, PERS, companion, extended PT, OT, speech, language and hearing, individual family support and residential rehabilitation training to the mentally retarded/developmentally disabled.	HHS/HCFA	06/23/93	Pending in HCFA; 90th day is 9/21/93.
Alabama 068.91.R1	Renewal--To provide case management, respite care, personal care and adult day health services to elderly and disabled people eligible for the services.	HHS/HCFA	06/18/93	Pending in HCFA; 90th day is 9/16/93.
Alabama 10162.02	Waiver modification to request exemption of independent assessment requirement.	HHS/HCFA	07/26/93	Pending in HCFA; 90th day is 10/24/93.
Arkansas 0188.90	Renewal--To provide case management, habilitation, consultation, in-home services, alternative living, transportation, respite and physical adaptive aids to the mentally retarded/developmentally disabled.	HHS/HCFA	8/3/92	Additional information request sent to RO 10/6/92; therefore 90-day clock has stopped. Awaiting State's response. State completing final touches on data, expects to submit to HCFA by 8/10/93.

Arkansas 0258	To provide case management, environmental modifications, transportation, specialized medical equipment and supplies, personal emergency response systems, companion services, physical therapy, occupational therapy, speech, hearing and language, prescribed drugs and home delivered meals to the disabled.	HHS/HCFA	10/14/92	State stopped 90-day clock on 12/11/92 to resubmit information. The State is reevaluating this request due to budgetary constraints.
California 0141.01	Waiver modification to redefine personal care services.	HHS/HCFA	06/25/93	Pending in HCFA; 90th day is 9/23/93.
California 0164.90	Renewal--To provide case management, home health aide, respite, environmental modifications, skilled nursing, utility coverage and Medi-Cal supplementation for infants and children in out-of-home care to physically disabled.	HHS/HCFA	02/03/92	Additional information request sent to RO on 4/17/92; therefore, 90-day clock has stopped. Awaiting State's response. The State is currently finalizing systems changes which need to be made before it can respond.
California 0270	To provide services to State developmental center residents in their communities and homes rather than in an institutional setting.	HHS/HCFA	07/29/93	Pending in HCFA; 90th day is 10/27/93.
Colorado 0211.03	Waiver modification to delete case management from HCBSW for persons living with AIDS.	HHS/HCFA	06/04/93	Pending in HCFA; 90th day is 9/2/93.
Colorado 0268	To provide homemaker, personal care services, respite care, adult day care, home modifications, transportation and alternative care facility services to the chronically mentally ill.	HHS/HCFA	05/07/93	Additional information request sent to RO on 7/19/93; therefore, 90-day clock has stopped. Awaiting State's response.

Colorado 0006.90.R2	Renewal--To provide case management, homemaker, personal care, adult day care, respite and transportation to aged and disabled.	HHS/HCFA	03/25/93	Additional information request sent to RO on 6/10/93; therefore, 90-day clock has stopped. Awaiting State's response.
Colorado 0006.90.R1.05	Waiver modification to add chronically mentally ill adults to the targeted group of recipients.	HHS/HCFA	05/17/93	Additional information request sent to RO on 7/19/93; therefore, 90-day clock has stopped. Awaiting State's response.
Colorado 0007.91.R1.04	Waiver modification to incorporate updated language, reorganize existing services and add new services.	HHS/HCFA	03/29/93	Additional information request sent to RO on 5/26/93; therefore, 90-day clock has stopped. Awaiting State's response.
Colorado 10157.90	Renewal--To provide services to children who are institutionalized or at risk of institutionalization.	HHS/HCFA	03/25/93	Additional information request sent to RO on 6/18/93; therefore, 90-day clock has stopped. Awaiting State's response.
Connecticut 0140.90.02	Waiver modification to provide for individuals who would qualify as medically needy if institutionalized.	HHS/HCFA	06/29/93	Pending in HCFA; 90th day is 9/27/93.
Connecticut 0140.90.03	Waiver modification to allow the State to serve individuals who would qualify for Medicaid as "medically needy".	HHS/HCFA	06/30/93	Pending in HCFA; 90th day is 9/28/93.
Delaware 0009.90.R1.02	Waiver modification to request exemption of independent assessment requirement.	HHS/HCFA	06/08/93	Pending in HCFA; 90th day is 9/6/93.

Florida 0010.90.R2	Renewal--To provide case management, adult day health, respite, transportation, home management/homemaker, counseling, escort and personal care to aged and disabled.	HHS/HCFA	07/07/93	Pending in HCFA; 90th day is 10/5/93.
Florida 0010.91.R2	Renewal--To provide case management, homemaker, respite, chore, adult day health, home delivered meals, and speech to aged and disabled age 18 and over.	HHS/HCFA	07/12/93	Pending in HCFA; 90th day is 10/10/93.
Florida 0116.90.R1	Renewal--To provide homemaker/personal care, case management, skilled nursing, home delivered meals, housekeeping/ chore to aged and disabled.	HHS/HCFA	07/06/93	Pending in HCFA; 90th day is 10/4/93.
Florida 0194.05	Waiver modification to request exemption of independent assessment requirement.	HHS/HCFA	01/23/92	Additional information request sent to RO on 3/25/92; therefore, 90-day clock has stopped. Awaiting State's response.
Illinois 40167	Model waiver to provide home health aide, respite, environmental modifications, private duty nursing, special medical supplies, equipment and appliances, medical day care and placement maintenance counseling to technology dependent and medically fragile children.	HHS/HCFA	12/16/91	State stopped 90-day clock on 2/14/92 to resubmit information. HCFA staff to provide on-site technical assistance to resolve issues in August or September.

Indiana 0249.01	Waiver modification to provide separate definitions of residential habilitation and home-based habilitation.	HHS/HCFA	06/21/93	Pending in HCFA; 90th day is 9/19/93.
Indiana 10151.90.02	Waiver modification to provide the development of a plan of care on behalf of persons with mental retardation.	HHS/HCFA	06/21/93	Pending in HCFA; 90th day is 9/19/93.
Iowa 10155.90	Renewal: To provide homemaker, home health, respite, transportation, chore, adult day care and mental home outreach to individuals 65 and over.	HHS/HCFA	07/20/93	Pending in HCFA; 90th day is 10/17/93.
Kansas 0018.90.R2	Renewal--To provide wellness monitoring adult day health, nonmedical attendant, night support, and respite care to aged/disabled and mentally retarded/developmentally disabled.	HHS/HCFA	03/31/93	Additional information request sent to RO on 6/28/93; therefore, 90-day clock has stopped. Awaiting State's response.
Kentucky 0019.91.R1.01	Waiver modification to provide the same amount of respite to all persons except those in group homes and staff residences to bring the estimated cost per units of service in line with payment rates.	HHS/HCFA	12/22/92	State stopped 90-day clock on 3/18/93 to resubmit information.

Louisiana 0259	To provide case management, personal care services, respite care, adult day health, transportation, environmental modifications, cognitive rehabilitative therapy, employment rehabilitation, and supervised individual living to persons with traumatic brain injury.	HHS/HCFA	06/29/93	Pending in HCFA; 90th day is 9/27/93.
Maryland 023.91.R1	Renewal--To provide case management, residential habilitation, day habilitation, environmental modifications, respite and intensive behavior management program to the mentally retarded developmentally disabled.	HHS/HCFA	05/27/93	Pending in HCFA; 90th day is 8/25/93.
Massachusetts 059.92.R1	Renewal--To provide case management, chore, homemaker, social day care, and respite to the frail elderly.	HHS/HCFA	12/02/92	State stopped 90-day clock on 3/1/93 to resubmit information.
Minnesota 061.90.R1.01	Waiver modification to provide a crisis intervention service to the mentally retarded.	HHS/HCFA	06/16/93	Pending in HCFA; 90th day is 9/14/93.
Montana 0232.01	Waiver modification to allow licensed professional counsellors to perform counseling as a psychological service.	HHS/HCFA	06/17/93	Pending in HCFA; 90th day is 9/15/93.

Nevada 0125.90.R1	Renewal--To provide case management and habilitation to mentally retarded/developmentally disabled.	HHS/HCFA	06/30/93	Pending in HCFA; 90th day is 9/28/93.
Nevada 0125.90.03	Waiver modification to remove case management services, add counseling services, extend coverage and make technical changes.	HHS/HCFA	07/26/93	Pending in HCFA; 90th day is 10/24/93.
Nevada 0152.90.03	Waiver modification to allow subcontractors to complete some of the PASARRS.	HHS/HCFA	04/01/93	Additional information request sent to RO on 6/29/93; therefore, 90-day clock has stopped. Awaiting State's response.
Nevada 0267.01	Waiver modification to change the waiver starting date.	HHS/HCFA	07/19/93	Pending in HCFA; 90th day is 10/17/93.
New Hampshire 0053E.90.03	Waiver modification to add respite care services and environmental modifications.	HHS/HCFA	05/12/93	Pending in HCFA; 90th day is 8/10/93.
New Hampshire 40177	To provide services for persons with an acquired brain disorder or insult.	HHS/HCFA	07/30/93	Pending in HCFA; 90th day is 10/28/93.
New Jersey 0031.90.R2	Renewal--To provide case management, habilitation, personal care and respite care to mentally retarded/developmentally disabled.	HHS/HCFA	07/02/93	Pending in HCFA; 90th day is 9/30/93.

New Mexico 0161.90	Renewal--To provide case management, homemaker/personal care and private duty nursing to patients with AIDS or ARC.	HHS/HCFA	11/20/92	State stopped 90-day clock on 1/21/93 to resubmit information.
New York 0238.02	Waiver modification to revise 372 report.	HHS/HCFA	07/19/93	Pending in HCFA; 90th day is 10/17/93.
New York 0269	To provide services to individuals with traumatic brain injury.	HHS/HCFA	07/26/93	Pending in HCFA: 90th day is 10/24/93.
New York 010176	To provide services for children who have developmental disabilities and complex medical conditions.	HHS/HCFA	06/07/93	Pending in HCFA; 90th day is 9/5/93.
North Carolina 0132.90.R1	Renewal--To provide screening, case management, in-home aide, chore, adult day health, respite and telephone alert to aged and disabled.	HHS/HCFA	06/30/93	Pending in HCFA; 90th day is 9/28/93.
Ohio 0196.90	Renewal--To provide case management, physical therapy, occupational therapy, social work/counseling, respite, personal care, dietary supplements, nutrition consultation, minor home modifications, adaptive and assistive devices to ventilator and tracheostomy dependent individuals under age 22.	HHS/HCFA	05/21/93	Pending in HCFA; 90th day is 8/19/93.

Oklahoma 0179.90.01	Waiver modification to revise administrative costs, transfer responsibility for approval of waiver services and decrease psychological evaluations.	HHS/HCFA	06/01/93	Pending in HCFA; 90th day is 8/30/93.
Oregon 0001.90.01	Waiver modification to increase aggregate amount of medical assistance.	HHS/HCFA	03/08/93	Additional information request sent to RO on 5/17/93; therefore, 90-day clock has stopped. Awaiting State's response.
Oregon 0117.90.R1	Renewal--To provide residential habilitation, day habilitation, transportation, and diversion/crisis services to the mentally retarded/developmentally disabled.	HHS/HCFA	03/12/93	Additional information request sent to RO on 6/7/93; therefore, 90-day clock has stopped. Awaiting State's response.
Pennsylvania 0192.90	Renewal--To provide skilled nursing, home health aide, supplies/nutritionals and homemaker services to AIDS or HIV patients.	HHS/HCFA	06/24/93	Pending in HCFA; 90th day is 9/22/93.
Rhode Island 0126.90.01	Waiver modification to provide services for individuals with functional quadriplegia who will be diverted from institutional care.	HHS/HCFA	07/23/93	Pending in HCFA: 90th day is 10/21/93.
Tennessee 0248	To provide case management, personal care, home delivered meals and environmental modifications to the aged and disabled.	HHS/HCFA	10/22/92	State stopped 90-day clock on 12/17/92 to resubmit information.
Texas 0240.04	Waiver modification to provide persons with mental retardation and/or related conditions who are determined to be inappropriately placed in nursing facilities.	HHS/HCFA	06/18/93	Pending in HCFA; 90th day is 9/16/93.

Vermont 0047.91.R2	Renewal--To provide case management, adult day health, habilitation and respite care to the mentally ill.	HHS/HCFA	06/30/93	Pending in HCFA; 90th day is 9/28/93.
Washington 0049.91.R1.04	Waiver modification to revise waiver eligibility requirements.	HHS/HCFA	07/02/92	State stopped 90-day clock on 9/11/92 to resubmit information.
Washington 0203.90	Renewal--To provide habilitation, adult day care, personal care, and nursing therapies to mentally retarded patients.	HHS/HCFA	03/18/93	State stopped 90-day clock on 6/3/93 to resubmit information.
Washington 0206.90	Renewal--To provide skilled nursing, nutrition consultation, attendant care, respite, psychosocial services and home delivered meals to AIDS patients.	HHS/HCFA	06/25/93	Pending in HCFA; 90th day is 9/23/93.
Washington 40175	To provide HCBS as an alternative to institutionalization for less than 200 persons having traumatic brain injury.	HHS/HCFA	05/13/93	State stopped 90-day clock on 7/26/93 to resubmit information.
West Virginia 0134.90.08	Waiver modification to expand waiver services to three additional counties; Wayne, McDowell and Preston.	HHS/HCFA	04/17/92	Additional information request sent to RO on 6/24/92; therefore, 90-day clock has stopped. Awaiting State's response.

SIGNIFICANT FOC WAIVERS

**SIGNIFICANT MEDICAID
FREEDOM OF CHOICE WAIVERS**

Description of Freedom of Choice Waivers--The freedom of choice waiver was enacted as part of the Omnibus Budget Reconciliation Act of 1981 and incorporated into the Social Security Act at section 1915(b). These waivers, also known as section 1915(b) waivers, allow States to apply to HCFA for exclusion from freedom of choice requirements, as well as from requirements of uniform Statewide operation (Statewideness) and identical benefits for different types of beneficiaries (comparability). Freedom of choice waivers allow States to develop innovative programs that will manage care and improve both access to services and quality of care for Medicaid recipients.

o California (14)

The purpose of implementing this waiver program is to enroll more Medicaid recipients in managed care (health maintenance organizations and prepaid health plans). Under the waiver program, new Aid to Families with Dependent Children (AFDC) and AFDC-related recipients would be enrolled in one of the existing managed care programs if the recipients:

- do not make a written choice between the regular fee-for-service (FFS) program or a managed care program, or
- choose FFS but do not certify that they have an existing relationship with a primary care provider.

We had several concerns with the proposal as follows:

- The HCO/Default Program may not accomplish its objective to enroll more Medicaid recipients in managed care. The proposal notes that the waiver program will simply require the recipients to decline enrollment in a managed care plan and indicate that they already have a doctor. By meeting these two requirements they can be in the fee-for-service program instead of managed care.

This presents recipients an easy way to avoid placement in managed care which could circumvent the State's intention to increase managed care enrollment.

- California did not provide any documentation to demonstrate that the waiver will be cost effective.
- The State did not provide any documentation to show whether enough access to services exists under the managed care program to allow for the additional enrollment which will result from the waiver program.

Because the State was unable to clarify these issues on an informal basis within the 90-day review period, HCFA had to formally request additional information in June 1993. California has not responded to these concerns, but intends to respond to in the near future.

o Oklahoma (01)

The waiver request was to set up a mental health program for children. The request was incomplete for the following major reasons:

- The State requested to establish a primary care case management program when in fact the program it described in the waiver package appeared to be a specialty physician services system.
- The State was proposing to offer additional services, as a cost saving measure, that did not appear to be covered as medical assistance under Section 1905(a) of the Social Security Act.

HCFA's Dallas regional office (RO) sent a formal request for additional information to the State on 12/30/92. While, the RO reports having discussed the waiver with the State since the additional information request, they have no indications as to whether the State plans to respond.

o Pennsylvania (04.M13)

Pennsylvania has submitted a modification request to the "HealthPass" waiver which would expand this managed care program, that currently covers approximately 75,000 recipients in South and West Philadelphia, to cover the remainder of Philadelphia and five contiguous counties, mandating enrollment for a projected 517,000 Medicaid beneficiaries.

While the current program has met all requirements regarding access, quality, and cost effectiveness, it operates under an exemption from existing HMO rules concerning composition of enrollment and disenrollment on

demand. The State wishes to maintain this exemption in its proposed expansion, and we have concerns about waiving these provisions in such a large-scale expansion.

The continuing political concerns over this program since its implementation in March 1986 and concerns about limiting Medicaid beneficiaries' choices to only one contractor in a service area need to be balanced with our concern for promoting State flexibility, Medicaid managed care expansion and the principles of managed competition.

On March 15, 1993, HCFA requested additional information from Pennsylvania on this request. The State responded to HCFA's request on June 1. A decision must now be made to approve or disapprove the requested waiver expansion by August 30, 1993.

ALL FOC WAIVERS

BIWEEKLY WAIVER TRACKING SHEET

STATE <small>(new States in bold)</small>	PROPOSAL	AGENCY	RECEIVED BY AGENCY	STATUS <small>(new items & changes in bold)</small>
RECEIVED				
1915(b) FREEDOM OF CHOICE				
Alabama 03	To provide comprehensive services on a prepaid payment basis for AFDC and SOBRA recipients residing in Jefferson and Shelby counties.	HHS/HCFA	07/23/93	Pending in HCFA; 90th day is 10/21/93.
California 13	To provide a managed care plan for an HMO or a primary care case management system.	HHS/HCFA	03/16/93	Additional information request sent to RO on 6/3/93; therefore, 90-day clock has stopped. Awaiting State's response.
California 14	To allow Medi-Cal beneficiaries to select a primary care physician to provide ongoing patient/physician relationships, primary care services and referral for all necessary specialty services.	HHS/HCFA	05/24/93	Pending in HCFA; 90th day is 8/22/93.
California 08.R02	Renewal--to provide a primary care case management program for Medi-Cal beneficiaries.	HHS/HCFA	12/2/92	Additional information request sent to RO on 2/5/93; therefore, 90-day clock has stopped. Awaiting State's response.
Colorado 03	To provide quality mental health care in the most cost effective and efficient manner for all necessary specialty groups.	HHS/HCFA	07/23/93	Pending in HCFA; 90th day is 10/21/93.

Florida 01.R1	Renewal--to provide a case management program for AFDC and AFDC related recipients in 4 counties.	HHS/HCFA	06/21/93	Pending in HCFA; 90th day is 9/19/93.
Indiana 01	To provide primary care services and referral for all necessary specialty groups.	HHS/HCFA	06/16/93	Pending in HCFA; 90th day is 9/14/93.
Louisiana 01.R02	Renewal: Request continuation if its current FOC waiver on emergency medical transportation.	HHS/HCFA	05/28/93	Additional information request sent to RO on 7/30/93; therefore 90-day clock has stopped. Awaiting State's response.
Louisiana 02.M03	Waiver modification to add additional exempted groups, additional exempted services and specify reports on a quarterly basis in certain rural parishes.	HHS/HCFA	05/26/93	Pending in HCFA; 90th day is 8/24/93.
Louisiana 02.M04	Waiver modification to add Sabine Parish and DeSoto Parish.	HHS/HCFA	05/27/93	Pending in HCFA; 90th day is 8/25/93
Massachusetts 01.M01	Waiver modification to provide a time limited payment enhancement for PCC's.	HHS/HCFA	06/28/93	Pending in HCFA; 90th day is 9/26/93.
Minnesota 01.R02	Renewal--To provide Statewide accessible chemical dependency treatment programs in a cost-effective manner.	HHS/HCFA	06/25/93	Pending in HCFA; 90th day is 9/23/93.
Missouri 01.M05	Waiver modification to include Medicaid for children recipients.	HHS/HCFA	06/18/93	Pending in HCFA; 90th day is 9/16/93.
Montana 02.M02	Waiver modification to change effective date.	HHS/HCFA	06/21/93	Pending in HCFA; 90th day is 9/19/93.

North Carolina 03	To provide a capitated mental health and substance abuse care program for Medicaid children called Carolina Alternatives.	HHS/HCFA	04/19/93	Additional information request sent to RO on 6/18/93; therefore 90-day clock has stopped. Awaiting State's response.
Ohio 06	To provide nursing facility services for Medicaid-eligible residents. The Nursing Facilities Access Program will be implemented State-wide.	HHS/HCFA	10/13/92	Additional information request sent to RO on 12/22/92; therefore 90-day clock has stopped. Awaiting State's response.
Oklahoma 01	To provide a system of care for children and youth who are Medicaid recipients and in need of mental health and/or substance abuse treatment services.	HHS/HCFA	11/5/92	Additional information request sent to RO 12/22/92; therefore 90-day clock has stopped. Awaiting State's response.
Pennsylvania 04.M13	Waiver modification to extend services covered by Healthpass to include the remainder of Philadelphia County, as well as Delaware, Bucks, Chester, Montgomery and Berks Counties.	HHS/HCFA	06/01/93	Pending in HCFA; 90th day is 8/30/93.
Pennsylvania 05	To provide primary care services and referral for all necessary specialty services.	HHS/HCFA	05/03/93	Additional information request sent to RO on 7/23/93; therefore 90-day clock has stopped. Awaiting State's response.
Pennsylvania 06	To provide a primary case management system in a fee for service setting to AFDC and SSI related recipients in Lancaster County.	HHS/HCFA	05/19/93	Pending in HCFA; 90th day is 8/17/93.

South Carolina 03	To provide a managed care system for Charleston, Dorchester and Berkeley Counties under the direction of the Medical University of South Carolina.	HHS/HCFA	12/21/92	Additional information request sent to RO on 3/3/93; therefore 90-day clock has stopped. Awaiting State's response.
Texas 04	To provide primary care case management specialty physician services system that reduces clients to participating in federally qualified HMOs and FQHCs in Travis County.	HHS/HCFA	05/10/93	To ASMB for OMB clearance; 90th day is 8/8/93.
Washington 07.M02	Waiver modification to expand Spokane County Health options geographic area.	HHS/HCFA	06/24/93	Pending in HCFA; 90th day is 9/22/93.
West Virginia 03.M01	Waiver modification to develop a subsystem for recipient and physician enrollment in the program.	HHS/HCFA	07/07/93	Pending in HCFA; 90th day is 10/5/93.

SIGNIFICANT WELFARE WAIVERS

ARKANSAS - Reduction in AFDC Birthrates Project

Description

The first tier of this project would target adult recipients by providing that:

- o Any children born into a recipient family would not be included for purposes of determining AFDC eligibility or grant amount.
- o If otherwise eligible, newborn children would receive Medicaid benefits.
- o Any child moving into the home from another home, e.g., a child returning from a relative's home, would be included for purposes of eligibility and benefit payments.
- o IV-A workers would provide in-depth information about family planning services available to applicants and recipients.

The second tier of the project would target teen recipients in selected counties and provide that:

- o For volunteers 13 to 17 years old, specialized group counseling sessions would be available covering issues of family planning, parenting, and child support. Non-monetary incentives, e.g., movie passes and retail coupons, would be offered to participants.
- o For minor parents under 16, participation in the New Hope component of the state JOBS program would be required.
 - Participation requirements would be to attend school or some type of educational activity with appropriate support services to facilitate participation.
 - New Hope case managers would provide counseling to participants.

Status

- o Application submitted January 14, 1993.
- o Secretary Shalala contacted Governor Tucker after discussion with the White House and asked him to reconsider the provision that would deny additional benefits to families receiving AFDC when additional children are born in light of the legal and political controversy.
- o We have offered to work with the State to help them design other interventions that might contribute to the similar

ARKANSAS - Reduction in AFDC Birthrates Project

objectives, such as enhancements to their efforts to reduce teen pregnancy.

- o We are waiting to hear back from Arkansas.

COLORADO - Colorado Personal Responsibility and Employment
Program (CPREP)

Description

- o Establish a 2-year limitation for AFDC eligibility for able-bodied adults, if not employed or participating in training. JOBS exemptions apply.
- o Consolidate AFDC, Food Stamp, and child care benefits into a single comprehensive benefits package.
- o Cash out Food Stamps.
- o Expand earned income disregards to \$120 and 58 percent of the remainder.
- o Require all AFDC households with children under the age of 24 months to have current immunizations, failure to comply will result in a financial sanction.
- o Provide incentives to participants who graduate from high school or obtain a GED.
- o Exempt the value of one car.
- o Increase the resource limit to \$5,000 for families with an able-bodied adult who is employed or has been employed within the last 6 months, all other households will have a resource limit of \$2,000.

Status

- o Application received June 30, 1993.
- o Work on this request is in its initial stages. On 8/9/93 we sent the State an initial analysis paper outlining issues requiring additional clarification or discussion.

GEORGIA - Personal Accountability and Responsibility (PAR)
Project

Description

- o Seeks to promote responsible decision making regarding family expansion and employment.
- o All applicants who have had their first child within one year of applying for benefits would be provided instruction in family planning and parenting skills.
- o The incremental increase in AFDC resulting from the birth of an additional child to a family who has received AFDC for a total of 24 months would be eliminated.
- o Able-bodied AFDC recipients, who are not otherwise exempt and who are not caring for a child under age 14, would be sanctioned if they refuse an offer of full-time employment, at minimum wage, or if they terminate such employment without good cause.
- o Current sanction policy would be modified so that the sanction could be lifted at the point the individual complied with the requirements.
- o Additional job-finding assistance would be provided to applicants and recipients by placing Department of Labor staff in local welfare offices.

Status

- o Application submitted May 18, 1993.
- o The Department is currently reviewing legal and policy concerns regarding the provision that would deny additional benefits to families receiving AFDC when additional children are born.

ILLINOIS - One Step At A Time and Relocation to Illinois

Description

One Step at a Time

- o Allow one of two alternative standards of budgeting income, depending upon which standard best meets the family's needs.
- o Provide AFDC incentive payments to participating students who achieve the demonstration's standard for school performance as defined by State policy.
- o Require recipients with children under the age of three to participate in a Community Service Corps for 20 hours per week.
- o Upon completion of the Community Service Corps program, enroll recipients in a program which provides employers with a subsidy to help pay wages and offset training costs of up to \$305 per month for up to six months per participant. Recipients would receive a wage in lieu of an assistance payment.

Relocation to Illinois

- o The amount of the AFDC benefits for an applicant would be equal to the benefit amount available to a family of the same size in the State of prior residence. This would apply to applicants who were recipients in their former state when they moved to Illinois and to applicants who received welfare at any time during the previous 12 months if the benefit level of the prior state was less than Illinois'.
- o After the first 12 months of residence in Illinois, the payment of benefits would be the amount payable to such a family according to the Illinois State Plan.

Status

- o Applications received October 7, 1992.
- o Illinois is reconsidering the design of One Step At A Time and asked the Department to defer action on this project.

IOWA - Iowa Family Investment Program (IFIP)

Description

- o Change the work expense disregard from \$90 to 20 percent of countable gross earnings of any person whose income must be counted, including earnings of stepparents.
- o Replace \$30 and one-third income disregard with a work incentive disregard equal to 50 percent of the earned income left after all other deductions have been subtracted from countable gross earnings. Disregard would apply without time limits, also apply to stepparents, and would not be withdrawn for failure to comply with program requirements.
- o Allow stepparents not receiving assistance to receive a child care deduction for the stepparent's dependents.
- o* Disregard all income for first four months of employment for new recipients who begin working after application for assistance and have earned less than \$1,200 in the previous 12 months.
- o* Apply retrospective budgeting procedures so as to disregard terminated income beginning with the first month income is absent.
- o* Disregard interest income.
- o* Disregard deposits into Individual Development Accounts (IDA's) as income. Allow IDA withdrawals for the purposes of education, training, home ownership, business start-up and family emergencies.
- o Determine eligibility for two-parent families without regard to work history and hours of work (except for establishing date to begin assistance).
- o* Increase asset limit from \$1,000 per assistance unit to \$2,000 for applicants and \$5,000 for recipients.
- o* Disregard assets in IDA's when determining eligibility.
- o Increase vehicle asset limit from \$1,500 to \$3,000 (and increase limit annually indexed to CPI). If other adults or teens are working, increase limit to \$3,000 per person.
- o Subject both parents in a UP case to work and training requirements.

IOWA - Iowa Family Investment Program (IFIP)

- o Remove current cap on JOBS funding and provide FFP for expenditures above the cap at 50 percent match.
- o Allow the State to require JOBS participation:
 - of the caretaker relative of a child under age 1
 - of those individuals whose needs have been removed from the grant due to sanction
 - for the entire term of a recipient's pregnancy unless determined disabled.
- o Require all parents to enter into an agreement, called a Family Investment Agreement (FIA), that outlines activities and time frames for achieving self-sufficiency (a limited group of persons would be exempted).
 - Public assistance would be time-limited based upon each family plan.
 - State would be allowed to determine appropriate penalties when a client fails to cooperate in signing an FIA or cooperating with its terms.
 - State would be exempt from the requirement to grant good cause for failure to participate in the FIA process or refusal to accept employment.
 - State would be exempt from the requirement to establish a reconciliation procedure to resolve FIA-related disputes.
 - State would be exempt from limitation on the number of weeks a recipients may be required to participate in job search after initial assessment.
- o Extend transitional child care from 12 to 24 months.
- o Limit, for 12 months, the grant levels of families relocating to Iowa to the lesser of Iowa's grant level or the grant amount they would have received in their previous State of residence.
- o Exempt State from the reduced FFP matching rate penalties for target group expenditures, participation rate requirements, and Unemployed Parent work component requirements.
- o Request waiver of all quality control review requirements during the project period.
- * Similar provisions to be applied to the Food Stamps program

IOWA - Iowa Family Investment Program (IFIP)

Status

- o Application received April 29, 1993.
- o ACF met with State representatives on 6/19/93. A number of subsequent teleconferences have taken place since then.
- o We are close to agreement with the State on major issues and expect final action on the request soon.

MASSACHUSETTS - Child Care Co-Payment Demonstration

Description

- o Require that JOBS participants contribute a portion of the cost of subsidized child care as a co-payment.

Status

- o Application received January 14, 1993.
- o We need to resolve a legal issue concerning whether by mandating that recipients must spend a specific amount of their grant on child care places unauthorizable restrictions on how families may use their grant payments.
- o We expect to submit an initial analysis to Massachusetts by August 13.

OKLAHOMA - Learnfare Program

Description

- o Would further the education of AFDC recipients by requiring AFDC children and parents, aged 13 to 18, to remain in school until they graduate from high school or obtain their GED.

Status

- o Application submitted December 28, 1992.
- o Waiver request was mandated by the State's legislature. The State Administration does not favor this project.
- o Draft Terms and Conditions for approval of the project were sent to the State 7/16/93. State officials have informed us that they have not yet reviewed the draft.
- o Final action of this proposal could occur quickly if the State has no problems with the Terms and Conditions.

SOUTH CAROLINA - Private/For Profit Work Experience Project

Description

- o Allows work experience assignments at for-profit sites.
- o Participation of designated eligibles is considered a condition of eligibility of the case for AFDC.
- o Training allowance and OJT wages are disregarded for AFDC and Food Stamp purposes for 12 months.
- o For the second 12 months, if employment commences, AFDC benefits are gradually reduced until eliminated entirely in fourth and final quarter.

Status

- o Application received December 9, 1992.
- o Interim discussions with the State have resulted in amendment to the application.
- o Sent State a document 7/20/93 seeking clarification of amendments that they are requesting and outlining issues requiring additional clarification or discussion.
- o Legal and policy decisions need to be made with respect to the provision that would make the entire case, including children, ineligible for assistance because of non-cooperation with work requirements by the caretaker relative. The State considers this provision critical to the purpose and effectiveness of the proposed demonstration.

VIRGINIA - Welfare Reform Demonstration

Description

- o Implement a multi-faceted demonstration with pilot projects in different locations.
- o Welfare Reform: Employers will select from a pool of voluntary, job-ready AFDC recipients to enter into training positions; make a commitment to hire participants upon completion of training; and provide that the jobs will be expected to pay between \$15-18,000 annually.
 - The State will pay the AFDC recipients a training stipend at least equal to their previous AFDC and Food Stamp benefits by issuing a single cash payment.
 - Incidental income earned during the training period and child support payments made will be disregarded as well as the value of the first vehicle.
- o Transitional Support Services Pilot: provide an additional two years of child care and Medicaid benefits to AFDC recipients whose cases are closed due to earned income.
- o Child Support Insurance Pilot: a child support insurance payment equal to the average support order for State cases by number of children will be available for families leaving AFDC due to earned income and having at least one support order for a parent living in Virginia. Participants will receive the larger of the insurance payment or the actual current child support paid in a month.
- o Other modifications:
 - A step-parent's income will be disregarded in determining the continued eligibility of the children when an AFDC recipient marries until the family's total income exceeds 150 percent of the poverty line.
 - Allow applicants and recipients of AFDC, Medicaid, Food Stamps and Fuel Assistance to establish savings accounts up to \$5,000 specifically for furthering education or providing a down payment on a primary residence.
 - Allow AFDC dependent children to continue to be eligible for assistance until age 21 if they are enrolled full time in a secondary school.

Status

- o Application submitted July 16, 1993.

VIRGINIA - Welfare Reform Demonstration

- o Work on this request is in its initial stages. An initial analysis paper outlining issues requiring additional clarification or discussion is to be sent to the State by August 12.
- o Coordination of this package will involve more than the usual group of Federal agencies as some provisions will require approval by HUD and IRS.

WISCONSIN - Welfare Not Work (WNW) Demonstration

Description

- o **Time Limit:** Clients may receive a WNW grant for 24 months and transitional benefits for 12 months within a four-year period beginning with the first month of eligibility under WNW. No cash benefits will be available for a period of 36 months after the last WNW payment is made. Food Stamp coupons would be cashed out and considered part of the WNW grant. In rare instances, clients would continue to receive a cash grant beyond the 24-month limitation because of "significant limitations."
- o **Children's Services Network:** Where benefits are terminated because the time limit has expired, supporting services will continue to be provided including helping the family find charitable food and clothing, WIC, child care for employed parents, and Medical Assistance for children only. A special needs grant, not to exceed the amount of a child only grant, will be provided in the form of a vendor payment for housing if a child will be made homeless as a result of termination of benefits. Food Stamp coupons are also available.
- o **The 100 Hour Rule:** The 100 hour rule in the AFDC-UP program would be eliminated.
- o **Maximum Payment:** The WNW payment would not increase for children conceived while enrolled in WNW.
- o **The Earned Income Disregard:** The \$30 and 1/3 disregard would be replaced by a \$30 and 1/6 disregard which would not be time-limited.
- o **Partial Freezing of Benefits:** Benefits, once determined, will not vary with changes in income between eligibility determinations unless there is a drop in earnings for good cause, or the client's income increases and the client wishes to have the benefit reduced in order to reduce the clients WNW work and training obligations.
- o **Work and Training Obligations:** After the first month the WNW grant is considered payment for activities clients perform the previous month. Clients without a high school diploma will be referred to a GED program. Education and training will generally occur in the first 12 months of eligibility. For those required to work, hours will be determined by dividing the grant by the minimum wage, but will not exceed 40 hours per adult participant.

- o Persons to whom the Work and Training Obligations Apply: With some exceptions, the work and training obligations apply to all parents in the budget group and to parents not themselves eligible.
- o Work Experience: Work Experience includes unsubsidized or partially subsidized employment, the Community Work Experience Program (CWEP), or an Independence Job - a job developed specifically for WNW recipients by the county.
- o Exemptions to the Work and Training Requirements: Parents caring for a child under 1 and not conceived while on the WNW are exempt from work requirements.
- o Transitional Services: Up to 12 months of transitional child care services is available, within the four year period starting with receipt of WNW grants, for clients who are employed. Up to 12 months of transitional medical services are similarly available within the four year period beginning with the first month of receipt of WNW benefits. Transitional child care and medical care are to be offered on a sliding scale fee basis based on earnings.

Status

- o Application received July 14, 1993.
- o Work on this request is in its initial stages. We sent an initial analysis paper outlining issues requiring additional clarification or discussion to the State on August 9 and scheduled a conference call for August 10.
- o The Department is currently reviewing legal and policy concerns regarding the specific provisions proposed for time-limiting welfare.

WYOMING - Welfare Reform: New Opportunities and New Responsibilities

Description

- o Require all able-bodied AFDC applicants/recipients in pilot counties to work or perform community service, unless specifically exempted.
- o Reduce the monthly benefit amount to an assistance unit by \$40 for each minor who has completed the eighth grade or attained age 16, but not graduated from high school, who refuses to attend school or accept suitable employment.
- o Reduce the monthly benefit amount to an assistance unit by \$100 and withhold eligibility for medical assistance from any nonexempt adult recipient who refuses to comply with program requirements.
- o Increase the resource limitation for an assistance unit from \$1,000 to \$2,500 while a recipient is employed, and for 3 months after employment ceases, if the loss of employment was for "good cause."
- o Hold the pilot counties harmless for one year for Quality Control errors.
- o Use supplied shelter tables when calculating benefits for recipients who receive a housing subsidy.
- o* Limit, for 12 months, the grant level for families relocating to Wyoming to the lesser of Wyoming's grant level or the maximum aid payment for which the family would be eligible in the State of previous residence.
- o** Disallow AFDC benefits to a recipient who:
 - is pursuing a second bachelor's degree or graduate degree;
 - has been pursuing a bachelor's degree for six or more years;
 - has been pursuing an associate's degree for four years or more; or
 - successfully completed the requirements for an associates or bachelors program six or more months ago.
- o Terminate assistance to recipients convicted of or admitting to fraud until all legal penalties are satisfied and full restitution is made to the State.

WYOMING - Welfare Reform: New Opportunities and New Responsibilities - continued

- o Remove restrictions on the Child Care and Development Block Grant funding to allow the State to adjust funds to improve the quality and availability of child care.
- o Allow court ordered support obligors to participate in the State's JOBS program, Wyoming Opportunities for Work (WOW).

Status

- o Application received May 20, 1993. It replaced and expanded on earlier pending applications for certain specific waivers submitted 9/14/92 and 1/4/93.
- o Several drafts of Terms and Conditions for approving the application have been shared with the State.
- o We anticipate final action on this proposal shortly.

ALL WELFARE WAIVERS

ACF - WELFARE REFORM: SECTION 1115 WAIVER ACTIVITY - August 6, 1993

STATE	INITIATIVE	KEY DATES	COMMENTS
APPROVED			
Vermont	Require participation in subsidized employment after 30 mo for AFDC and 15 mo for AFDC-UP cases, broaden AFDC-UP eligibility, change earnings disregards, change JOBS exemptions, disburse child support to AFDC family, require most minors to live in supervised setting, extend eligibility in child-only cases.	Appl. Rec'd 10/27/92 Appl. Approved 4/12/93	
DENIED			
Illinois	Would have paid lesser of previous State of Illinois benefit for 12 months for new residents.	Appl. Rec'd. 10/7/92 Appl. Den'd. 8/3/93	
RECEIVED			
Arkansas	Eliminate increased AFDC benefits for additional children; provide special counseling to 13-17 yr olds and require participation in educational activity.	Appl. Rec'd 1/14/93	Discussion of potential modifications currently underway with State

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Colorado	<p>Establish a 2-year time limitation sanction for non-cooperative employable AFDC adults; consolidate AFDC, Food Stamp, and Child Care benefits into a single comprehensive benefits package; disregard a portion of all earned income, replacing all current income disregards; require all AFDC households with children under the age of 24 months to have current immunization, failure to comply will result in a financial sanction; provide incentives to participants who graduate from high school or obtain a GED; exempt the asset value of one care; and increase the resource limit to \$5,000 for those families with an able-bodied adult who is employed or has been employed within the last 6 months.</p>	<p>Appl. Rec'd 6/30/93</p>	<p>Analysis paper sent to Federal reviewers.</p>
Georgia	<p>Provide family planning and parenting services; eliminate increased AFDC benefit for additional children; require able-bodied adults to accept full-time employment if they are not caring for children under 14.</p>	<p>Appl. Rec'd 5/18/93</p>	<p>Application has been distributed to Federal reviewers. Decision memorandum sent to Secretary on family cap on benefits. Issue discussed by Senior Department Staff in briefing with Deputy Secretary on 8/4.</p>
Illinois	<p>Provide incentives for school attendance; require participation in a Community Service Corps (CSC) for those with children under 3; provide wage subsidy for up to 6 mo. after completing CSC.</p>	<p>Appl. Rec'd 10/7/92</p>	<p>These waivers were tabled by the State for their reconsideration; awaiting state action.</p>

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Iowa	Multi-faceted proposal including: changes in income disregards, increased resource limits, limiting JOBS exemptions, extending child care transitional benefit to 24 mo., paying lesser of previous state or Iowa benefit for 12 mo. for new residents, requiring most parents to develop self-sufficiency plan which includes individually based time limit on public assistance.	Appl. Rec'd 4/29/93	Met with State representatives on 6/16/93. Draft terms and conditions sent to Federal Reviewers 8/5.
Massachusetts	Require JOBS participants to pay co-payment for child care.	Appl. Rec'd 1/14/93	Application distributed to Federal reviewers.
Oklahoma	Require school attendance of AFDC recipients aged 13-18.	Appl. Rec'd 12/28/92	Draft Terms and Conditions sent to State 7/16 for their review.
South Carolina	Provides for work experience at for-profit sites, disregard of training allowances, changes to earnings disregards.	Appl. Rec'd 12/9/92	Sent State 7/20 analysis paper regarding issues needing further discussion or clarification.
Virginia	1) Up to 600 participants would voluntarily exchange AFDC/Food Stamp benefits for jobs expected to pay \$15-18,000/yr. Training stipends equal to AFDC and FS benefits would be paid initially. 2) Provide additional 24 mo. child care and Medicaid transition benefits. 3) Establish a child support insurance program for those leaving AFDC due to earnings. 4) Disregard step-parent income when AFDC recipient marries; increase resource limit to \$5,000 for education and housing purposes; extend AFDC eligibility to full-time students until age 21.	Appl. Rec'd 7/13/93	Application distributed to Federal reviewers. Analysis paper being prepared.

Wisconsin	<p>Provides a maximum of 4 years eligibility with cash benefits for up to 2 years and 12 mo. transitional medical and child care benefits; no cash benefits available for a period of 36 months after last month in which a demonstration benefit was paid; cash-out food stamps and make part of the benefit; education and training services provided; CWEP placements or public job required for those who remain unemployed; changes JOBS exemptions; no additional benefit for children born to AFDC families; child support payments will be directed to the family and counted as income; fixed period of benefit calculation.</p>	<p>Appl. Rec'd 7/14/93</p>	<p>Conference call with State 6/28 discussed issues and questions. Decision memo sent to Deputy Secretary regarding time-limited welfare demonstration and issue was discussed by Senior Department Staff in briefing with Deputy Secretary on 8/4.</p>
Wyoming	<p>Require able-bodied AFDC applicants and recipients to work or perform community service, require school attendance for those 16 and over, change sanction penalties for non-compliance with work requirements, increase resource limit for employed families, limit or eliminate AFDC benefits in certain cases where recipient is in post-secondary ed. program, provide JOBS to non-custodial parents court-ordered to participate, provide lesser of benefit for Wyoming or prior state of residence for 12 mo. for new residents.</p>	<p>Appl. Rec'd 5/20/93</p>	<p>State desired approval by July 1. Draft terms and condition sent to State 7/8. Subsequent negotiations proceeding.</p>

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**PRE-
APPLICATION
CONTACT**

Alaska

Would repeal 100-hour rule for AFDC-up; expand working incentives; increase resource and vehicle asset limit; eliminate "new job" requirement for work supplementation and extend transitional medicaid benefits.

ASPE official met with State Staff 6/22.

California

Implement Cal. Learn, a Learnfare program that provides both bonuses and sanctions. Increase the resource limit to \$2,000 and the automobile exemption to \$4,500 and allow savings of up to \$5,000 in restricted accounts. Create an Alternative Assistance Program that allows AFDC applicants and recipients with earned income to choose Medicaid and Child Care Assistance in lieu of a cash grant. Allow for alternative to the current systems of monthly reporting of income and family circumstances, AFDC annual redetermination, and Food Stamp recertifications. Test one or more modifications to the AFDC and Food Stamp requirements for verification of eligibility information. Modify AFDC and Food Stamp program requirements to streamline eligibility determinations by making eligibility requirements compatible between the two programs. Provide supplemental child care payments to working AFDC recipients who have child care costs in excess of the child care income disregard amount. Implement multiple reforms to the GAIN (JOBS) program. Conduct a demonstration, in up to 3 counties, of alternatives to the current monthly reporting system, AFDC redetermination, and Food Stamp recertification for recipients of Alternative Assistance.

State officials met with ACF Staff on 7/19 on plans to apply for additional waivers.

Connecticut

Statewide, would remove deprivation requirement in AFDC to allow children to receive assistance even if living with both parents, increase resource and vehicle asset limits and increase child support pass through to \$100. In selected pilot sites, would decrease AFDC cash benefits and cash-out Food Stamps, impose a time limit on eligibility, create a child support assurance system, increase earned income disregards, establish even higher asset limits, and extend medical, child care and case management supports after a case is made ineligible due to earnings.

State officials met with ACF staff on 7/21 to discuss applying for waivers.

Florida

With some exceptions, AFDC benefits will not be received for more than 24 months in any 60-month period by applicants and current recipients. Would also replace the current \$90 and \$30 and one-third disregards with a single, non-time-limited disregard of \$200 plus one-half remainder; eliminate the 100-hour rule, the required quarters of work, and (on a case-by-case basis) the 6-month time limit requirements in the AFDC-UP program. Increase transitional Medicaid and child care benefits; disregard the income of a stepparent whose needs are not included in the assistance unit for the first 6-months of receipt of public assistance, raise the asset limit to \$5,000 plus a vehicle of reasonable worth used primarily for self-sufficiency purposes. Require school conferences, regular school attendance, and immunizations; and lower age of child for JOBS exemption to 6-months.

Draft application received and being analyzed by ACF. Formal application expected soon.

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Minnesota	Would increase vehicle issue limits and earned income disregards for students.	Plans to apply for waivers.
Mississippi		Proposal being developed by State. State representatives met with ACF staff 7/28.
Nevada		Contacts received from state; application expected.
Pennsylvania	The Penn. Governor's task force has recommended a number of new provisions designed to help AFDC families move toward work and independence. These provisions would establish mutual responsibility, eliminate disincentives to work, strengthen families and support children, promote economic independence with a number of disregards and intensive case management, and simplify the process.	Program presented by Penn. in a meeting on 7/13 with ACF Staff. Application expected.
South Dakota	Would require a "Social Contract" setting goals for economic self-sufficiency, require participation in community/volunteer service to "earn" AFDC grant after specific time limits, increase earned income disregards, sanction cases for voluntarily quitting employment and extend eligibility for full-time high school students through age 19.	ACF provided feedback to State based on outline of waiver provisions sent 5/20. State expects to submit application soon.

ANTICIPATED

Kansas

Would eliminate 100-hour and work history rules for AFDC-UP cases, make case eligibility dependent on experience to a self-sufficiency plan, increase earned income disregards, extend medicaid transition benefits, exempt assets of one vehicle, extend CWEP and OJT activities to include private businesses, provide case incentives for staying in school, establish coordinated teen pregnancy prevention effort and other initiatives targeting youth at-risk of long-term welfare dependency, guarantee payment of child support, seek voluntary acknowledgement of paternity, allow fathers of unborn child to receive assistance if they acknowledge paternity, establish electronic benefit transfer (EBT).

Proposal being developed by State.

Massachusetts

Letter received from congressional delegation supporting earned income disregard waiver; however, we have not received a request from the state. ACF responded to State's letter of intent that approval would be subject to cost neutrality.

New Hampshire

Would increase earned income disregard to \$200 and 1/2 without time duration limits.

State legislation passed. Proposal being developed by State.

North Dakota	Would provide incentives to encourage participation in education and training activities.	Proposal being developed by State.
Washington	Legislation involves methods of calculating benefits and elimination of the 100-hour rule for AFDC-UP cases.	ACF Regional Office staff indicate that State legislation which would require waivers is being considered. 6/24 ACF had telephone call with state staff to discuss application procedures.