



Medicaid and Employment

AAIDD

November 2011

1915 (c) Waiver Technical Guidance

Revisions Released as Information Bulletin September 2011

- Highlights the importance of competitive work for people with and without disabilities and CMS's goal to promote integrated employment options through the waiver program
- Supports States' efforts to increase employment opportunities and meaningful community integration for waiver participants.
- Provides further clarification of CMS guidance regarding several core service definitions and adds several new core service definitions.

Key Updates to CMS Waiver Guidance:

- Provides a strong preamble that highlights the importance of competitive work and CMS's goal to promote more integrated employment options in waivers
- Emphasizes the critical role of person centered planning in achieving employment outcomes

Key Updates to CMS Waiver Guidance: continued

- Clarifies that pre-vocational services are not an end point, but a time limited (but no specific limit given) activity to help someone obtain competitive employment
- Describes that volunteer work and other work type activities that are not paid, integrated community employment are appropriately classified as pre-vocational, not supported employment services

Key Updates to CMS Waiver Guidance: continued

- Articulates best practices and highlights self direction options for employment support, including self-employment, peer to peer, co-worker support...
- Explains that Ticket to Work Outcome and Milestone payments are not in conflict with payment for Medicaid services rendered

Key Updates to CMS Waiver Guidance: continued

- Splits supported employment into two core service definitions- individual employment support and small group employment support (2 to 8 people)
- Adds a new core service definition for career planning, that is currently used by several States

Medicaid and Employment Guidance to States

- CMS is not changing policy, but rather clarifying and strengthening guidance around permissible waiver options to promote employment for people with disabilities and individuals who are elderly.
- These changes will also be included in version 3.6 of the Waiver Technical Guide to be released at a later date

Affordable Care Act

Section 2403: **Money Follows the Person (MFP) Demonstrations**, provides opportunities for States to promote and support employment through program administration, policies and services. States also have opportunities within their rebalancing funds to support employment related services and activities.

Affordable Care Act

Section 10202: **Balancing Incentive Program** offers a targeted FMAP increase to States that undertake structural reforms to increase access to HCBS. Effective October 1, 2011

Affordable Care Act

Section 2402 of the Affordable Care Act allows States to expand access to home and community based services without requiring institutional level of care for enrollees. Known as the **1915 (i) State plan option**

Affordable Care Act

Community First Choice Option - Adds Section 1915 (k) to the Social Security Act, Includes a 6 % enhanced FMAP Statewide, community services (not institutions), CFC is an optional State plan benefit which utilizes a person-centered plan and allows for provision of services to be self-directed under either an agency-provider model or a self-directed model with a service budget. The benefit can be used to support an individual's employment goals.



Rie Kennedy-Lizotte

Director of Communities of Practice

National Association of State Directors of Developmental Disabilities Services (NASDDDS)

NASDDDS Project Manager for State Employment Leadership Network
A Joint Project of NASDDDS and the Institute for Community Inclusion
(ICI) UMASS Boston

rklizotte@nasdds.org