

**History and Background of DDA’s Medicaid Waiver**

September 2014

In 1984, the federal government approved an application from DDA to use Medicaid funding to provide home and community based services instead of services in institutions such as Great Oaks and Rosewood Center. These home and community based services are provided through a Medicaid waiver, which is a program that can “waive” or ignore some of the Medicaid rules. Until Medicaid home and community based service waivers were introduced, states could only get federal funding to provide long term supports to people with developmental disabilities for institutional care. Because federal funding in Maryland pays half the cost of care, the waivers made it possible to expand home and community based services and close institutions.

 Almost 30 years later, Maryland has indeed closed most of its institutions for people with developmental disabilities and about 140 individuals remain in state institutions: Potomac Center, Holly Center and the Secure Evaluation and Therapeutic Treatment programs. Over 14,000 people with developmental disabilities live in the community with supports and services from DDA’s Medicaid waivers.

To qualify for federal Medicaid funds, DDA must comply with federal Medicaid rules and regulations. Some of these rules give important rights to Medicaid waiver participants. One of the most important rights is that waiver participants **have a legal entitlement to receive all needed Medicaid waiver services with reasonable promptness**.

Maryland’s state Medicaid program, called the Medical Assistance Program, receives about half of its funding from the federal government’s Medicaid program. The Medicaid program only serves people with low incomes, disabilities, and/or very high health care expenses. It primarily delivers free medical care and long term care in nursing facilities and institutions for people with developmental disabilities. Since most people want services in their own homes, Medicaid has also made it possible for states to provide long term community-based services through Medicaid home and community based “waiver” programs. Medicaid waivers allow states to “waive” or ignore some of the Medicaid program rules. For example, a Medicaid waiver can limit enrollment to certain groups such as individuals with developmental disabilities or children with autism. States can expand the income eligibility requirements. States can expand the services that are offered by the regular Medicaid State Plan for a specialized population and then define the services offered under the Medicaid waiver. Many states have limited the number of Medicaid waiver participants. People with developmental disabilities may be eligible for many Maryland Medical Assistance programs and more than one Maryland Medicaid waiver. However, DDA’s Medicaid waiver has the most comprehensive service array of all the Maryland Medicaid waivers. It also has no individual cost cap.

DDA operates Maryland’s largest Medicaid waiver, called Community Pathways. In 2014, DDA’s New Directions waiver ceased to exist, but the self-directed services available under New Directions have been added to the Community Pathways waiver. DDA’s Medicaid waiver serves people with developmental disabilities of all ages and offers a wide range of supports in a person’s home or in a community home.

**Once you are enrolled in a Medicaid waiver, your entitlement to services could continue for your life span.** Because of the nature of a developmental disability, a qualified individual usually continues to meet the disability requirements to remain enrolled in the Medicaid waiver. Individuals are more likely to lose their eligibility for other reasons than a change in disability status. You can be disenrolled from the waiver if you’re admitted to a Medicaid long-term care facility or hospital for over 30 days, but you can re-enter the waiver when you are discharged. You can lose your waiver slot if you don’t use Medicaid waiver services. You can also be disenrolled from the waiver if you no longer meet the financial eligibility requirements. If this occurs, you will receive a written notice and an opportunity to request a hearing. Contact your resource coordinator or DRM for advice.

For more information about applying for or accessing DDA services, see DRM’s web site at [www.DisabilityRightsMD.org](http://www.DisabilityRightsMD.org). For advice or technical assistance, call 410-727-6352, extension 0 and ask for intake.