

**Medicaid Analytic Extract  
Waiver Crosswalks, 2009**

April 30, 2013



**MATHEMATICA**  
Policy Research

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Contract Number:  
HHSM-500-2005-00025I

**Medicaid Analytic Extract  
Waiver Crosswalks, 2009**

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Submitted to:  
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April 30, 2013

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## ALABAMA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Alabama Family Planning 1115	Plan First (Family Planning)	1115	F	FP	07/01/00	10/1/08	11/30/11	Jan-05	Ongoing
NP	Alabama Patient 1st 1915(b)	Patient 1st	1915B	2	P1	10/02/96	1/1/09	03/31/11	Jan-05	Ongoing
NP	Alabama Patient 1st 1915(b)	Maternity Care Waiver	1915B	2	MC	10/02/96	1/1/09	03/31/11	Jan-05	Ongoing
0068.91.R3.04	AL - Elderly and Disabled Individuals	Elderly & Disabled Waiver	1915C	G	ED	03/09/98	NP	06/30/12	Jan-05	Ongoing
0241.90.R2	AL Independent Living Waiver Program	Independent Living Waiver	1915C	I	SA	09/24/01	4/1/10	01/31/13	Jan-05	Ongoing
40382.R01.00	Alabama Individuals w/HIV/AIDS & Related Illnesses	HIV/AIDS Waiver	1915C	K	AD	10/01/04	10/1/07	03/31/14	Feb-05	Ongoing
0391.90	AL - Living at Home Waiver for Individuals with Mental Retardation	Living at Home Waiver	1915C	L	LH	05/08/02	NP	04/30/13	Jan-05	Ongoing
0001-90.R4.01	Alabama Mental Retardation /Developmentally Disabled	Mental Retardation Waiver	1915C	L	MR	10/31/01	NP	06/30/12	Jan-05	Ongoing
0407	Alabama Assisted Technology Waiver	Technology Assisted Waiver	1915C	N	TA	02/11/03	2/1/08	12/31/11	Jan-05	Ongoing

NP = Not Provided

## ALASKA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00186/10	Alaska Denali KidCare 1115	Denali KidCare Demonstration	1115	I	CP	9/24/04	NP	9/30/09	Oct-05	Sep-09
0261.90.R1.03	AK - Older Alaskans	Older Alaskan Waiver	1915C	H	OA	10/15/01	7/1/09	6/30/16	Jan-05	Ongoing
0262.90.R1.03	AK-Adults with Physical Disabilities	Adults with Physical Disabilities	1915C	I	AD	10/15/01	7/1/09	6/30/16	Jan-05	Ongoing
0260.90.R1.04	People with Mental Retardation and DD	Mental Retardation/Developmental Disabilities	1915C	L	MR	10/15/01	7/1/09	6/30/16	Jan-05	Ongoing
0263.90.R1.03	AK - Children with Complex Medical Conditions	Children with Medically Complex Conditions	1915C	N	CM	10/15/01	7/1/09	6/30/16	Jan-05	Ongoing

NP = Not Provided

## ARIZONA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00032/9-17	Arizona Health Care Cost Containment System	Comprehensive State Health Reform Waivers Under 1115 Authority	1115	1	A1	7/13/82	10/1/82	9/30/16	Jan-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Arizona HIFA 1115	1115	5	A1	12/12/01	11/1/01	9/30/11	Jan-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Family Planning	1115	F	A1	7/13/82	10/1/82	9/30/16	Jan-05	Ongoing

## ARKANSAS'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
21-W-0005116 and 11-W-0021416	Arkansas Safety Net Benefit Program HIFA	Arkansas Safety Net Benefit Program HIFA	HIFA	5	No ID	3/3/06	12/29/11	12/31/13	NR	NR
21-W-0005116 and 11-W-0021416	Arkansas Safety Net Benefit Program HIFA	Primary Care Case Management	HIFA	5	A1	3/3/06	12/29/11	12/31/13	Oct-06	Ongoing
11-W-0074/6	Arkansas Family Planning 1115	Women's Health Waiver	1115	F	B1	6/18/96	2/1/09	1/31/12	Jan-05	Ongoing
11-W-00115/6	Arkansas ARKidsB	ARKids First-B	1115	1	A9	8/19/97	10/1/08	12/31/13	Jan-05	Ongoing
11-W-00116/6*	Arkansas Independent Choices - Cash and Counseling	Independent Choices	1115	1	B2	10/9/98	12/1/01	3/31/08	Jan-05	Mar-08
11-W-00163/6	Arkansas TEFRA	TEFRA	1115	1	B3	10/17/02	12/31/07	12/31/13	Jan-05	Ongoing
NP	Arkansas Non Emergency Transportation Waiver 1915(b)	Non-Emergency Transportation	1915B	2	A2	2/19/98	10/1/09	9/30/13	Jan-05	Ongoing
0400.90	AR - Assisted Living	Assisted Living/Living Choices	1915C	G	A8	10/24/02	12/1/10	11/30/15	Jan-05	Ongoing
0195.90.R2.03	AR- Elder Health Choices Program	Elder Choices	1915C	H	A4	9/26/01	7/1/09	6/30/13	Jan-05	Ongoing
312.90.R1	NP	Alternatives for Adults w/Physical Disabilities	1915C	I	A5	NP	7/1/05	6/30/15	Jan-05	Ongoing
0188.90.R2	AR - Alternative Community Service	Alternative Community Services (DDS)	1915C	L	A3	8/6/02	7/1/09	6/30/13	Jan-05	Ongoing

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NR = Not Reported

\* Represents waivers that were active in 2008 but were not active in 2009.



## CALIFORNIA'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00129/9	California Family Planning, Access, Care and Treatment (PACT) 1115	Family Planning, Access, Care and Treatment (PACT)	1115	F	01	12/1/99	4/1/05	6/30/10	Jan-05	Ongoing
11-W-00184/9	California In-Home Supportive Services Plus (IHSS Plus)	IHSS Plus Waiver	1115	1	17	7/31/04	8/1/04	9/30/09	Jan-05	Sep-09
NP	California Children's Services and Sacramento Dental Geographic Managed Care	California Children Services/Dental Managed Care	1915B	2	03	8/13/03	10/1/09	9/30/11	Jan-05	Ongoing
NP	California Health Insuring Organizations (HIOs)	Health Insuring Organizations of California	1915B	2	04	7/10/03	7/11/03	6/30/11	Jan-05	Ongoing
NP	California Santa Barbara Health Initiative 1915 (b)	Santa Barbara Health Initiative	1915B	2	06	1/1/87	1/1/09	10/31/10	Jan-05	Ongoing
NP	California Health Plan of San Mateo	Health Plan of San Mateo	1915B	2	07	12/30/87	10/1/08	9/30/11	Jan-05	Ongoing
CA-25.90-R01	California - ICF/DD-CN (Intermediate Care Facility/Developmentally Disabled)	Intermediate Care Facility/Developmentally Disabled-Continuous Nursing	1915B	2	08	8/17/01	10/1/07	9/30/09	Jan-05	Sep-09
CA-17-R03	Specialty Mental Health Service Consolidation - Medi-Cal	Specialty Mental Health	1915B	2	10	11/16/00	10/1/09	6/30/11	Jan-05	Ongoing
0431	CA - Home and Community Based Services Assisted Living Waiver	Assisted Living Pilot Project	1915C	G	18	4/1/05	3/1/09	2/28/14	Apr-07	Ongoing
0141.93.R1.03	Multipurpose Senior Services Program	Multipurpose Senior Services Program	1915C	H	14	2/2/01	7/1/09	9/30/14	Jan-05	Ongoing
0139.90.R2	NP	Nursing Facility / Acute Hospital (NH/AH)	1915C	I	21	NP	1/1/07	6/30/13	Jan-07	Ongoing
0457	NP	In-Home Operations	1915C	I	20	NP	10/1/09	6/30/15	Jan-07	Ongoing
0183.90.R1.01	CA - AIDS Waiver	AIDS Waiver	1915C	K	11	3/7/02	1/1/07	9/30/13	Jan-05	Ongoing
0336.90.07	CA - HCBS Waiver for Persons with Developmental Disabilities	Developmentally Disabled	1915C	L	12	8/1/01	NP	4/30/15	Jan-05	Ongoing
0759.ROO.00	CA- Developmentally Disabled-Continuous Nursing Care (DD-CNC)	Developmentally Disabled-Continuous Nursing Care (DD-CNC)	1915C	L	23	10/1/09	NP	9/30/12	NR	NR

NP = Not Provided

NR = Not Reported

**COLORADO'S 2009 MEDICAID WAIVERS**

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Community Mental Health Services Program	Community Mental Health Services Program 1915(b)	1915B	2	MH	3/6/98	7/1/07	6/30/11	Jan-05	Ongoing
0006.R05.00	CO Elderly, Blind and Disabled	HCBS Waiver for Persons who are Elderly, Blind, and Disabled	1915C	G	EB	7/1/85	7/1/08	6/30/15	Jan-05	Ongoing
4157.90.R2	CO - Children Home & Community Based Services Medicaid Waiver	Children's HCBS Waiver	1915C	I	KB	7/1/03	7/1/08	2/28/11	Jan-05	Ongoing
0288.90.R1.02	CO - Brain Injured	HCBS Waiver for Persons with Brain Injury	1915C	J	BI	7/1/03	7/1/08	6/30/13	Jan-05	Ongoing
0211.91.R2	CO - Persons Living with AIDS	HCBS Waiver for Persons Living with AIDS	1915C	K	PL	1/1/04	1/1/09	12/31/13	Jan-05	Ongoing
4180.90.R1	CO - Children's Extensive Support	Children's Extensive Support Waiver	1915C	L	CE	7/1/04	7/1/09	6/30/14	Jan-05	Ongoing
0305.90.R1	CO - Children's Habilitation Residential Program	Children's Habilitation Residential Program Waiver	1915C	L	CR	7/1/04	7/1/09	6/30/14	Jan-05	Ongoing
0007.91.R4	CO - Developmentally Disabled	Waiver for Persons Developmentally Disabled	1915C	L	DD	7/1/04	7/1/09	6/30/11	Jan-05	Ongoing
0293.90.R1	CO - Support Living Services	Supported Living Services	1915C	L	SL	7/1/04	7/1/09	2/28/11	Jan-05	Ongoing
0268.90.R1.01	CO - Persons with Mental Illness	HCBS Waiver for Persons with Mental Illness	1915C	M	MI	7/1/02	7/1/07	6/30/15	Jan-05	Ongoing
0450	CO - Pediatric Hospice	HCBS Pediatric Hospice Waiver (PHW)	1915 C	N	PH	1/26/07	7/1/07	6/30/15	Feb-08	Ongoing
0434.R01.00	CO HCBS Children with Autism	HCBS Waiver for Children with Autism	1915C	P	AT	1/1/06	1/1/09	12/31/13	Jan-08	Ongoing

NP = Not Provided

## CONNECTICUT'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Connecticut HUSKY Plan Part A	Husky A (MCO Waiver)	1915B	2	M1	7/20/95	7/1/09	6/30/11	Jan-05	Ongoing
0140.90	NP	HCBS Waiver - Elderly (CHC)	1915C	H	C1	NP	7/1/05	3/31/14	Jan-05	Ongoing
0301	NP	The Connecticut Personal Care Assistance Waiver (PCA)	1915C	I	P1	7/1/96	10/1/09	12/31/13	Jan-05	Ongoing
0302.90.R1	CT Acquired Brain Injury	The Connecticut Acquired Brain Injury Waiver (ABI)	1915C	J	A1	1/1/99	1/1/07	12/31/12	Jan-05	Ongoing
0437.R01.00	CT Comprehensive Supports	Comprehensive Waiver	1915C	L	D2	10/1/05	10/1/08	12/31/12	Oct-05	Ongoing
40110.91.R3	CT - Katie Beckett Mental Retardation / Developmental Disabilities	HCBS Waiver - Katie Beckett Model	1915C	L	K1	1/1/02	1/1/07	9/30/11	Jan-05	Ongoing
0653.R00.00	CT HCBS Waiver for People w/Serious Mental Illness in Nursing Homes	MH Waiver	1915C	M	H1	9/15/09	4/1/09	3/31/13	May-09	Ongoing
0426-IP	NP	IFS Waiver	1915C	L	I1	2/1/05	2/1/08	12/31/12	Jan-05	Ongoing

NP = Not Provided

## DISTRICT OF COLUMBIA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00139/3	District of Columbia 1115 for Childless Adults	MA 1115 (50-64) Demo Waiver	1115	1	01	3/7/02	2/1/03	12/31/13	Jan-05	Ongoing
11-W-00131/3	D.C. Program to Enhance Medicaid Access for Low-Income HIV-Infected Individuals	1115 Special Needs Waiver	1115	1	06	1/19/01	11/5/04	6/30/10	Jan-05	Ongoing
0334.90	DC - Elderly and Physical Disabilities Waiver	MA 1915(C) Elderly and Physical Disabilities (EPD) Waiver	1915C	G	03	1/4/99	1/1/07	2/28/13	Jan-05	Ongoing
11-W-0021/3	NP	MA 1915(C) Special Needs Waiver	1915C	K	02	1/1/97	1/1/05	12/31/09	Jan-05	Dec-09
0307.R02.00	District of Columbia Mental Retardation / Developmental Disabilities	MA 1915(C) Mental Retardation / Developmental Disabilities Waiver	1915C	L	05	9/1/98	11/20/07	9/30/12	Jan-05	Ongoing

NP = Not Provided

## DELAWARE'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W00036/3	Delaware Diamond State Health Plan 1115	Diamond State Health Plan (Managed Care Demonstration Waiver)	1115	I	01	5/17/95	10/1/10	12/31/13	Jan-05	Ongoing
11-W00036/3	Delaware Diamond State Health Plan 1115	Family Planning	1115	F	01	5/17/95	10/1/10	12/31/13	Jan-05	Ongoing
0136.90.R3.02	DE - Waiver for the Elderly and Disabled	HCBS Waiver for Elderly and Disabled	1915C	G	02	7/1/89	7/1/09	6/30/11	Jan-05	Ongoing
0332.91	DE - Assisted Living Waiver	HCBS Waiver for Assisted Living	1915C	G	03	10/1/98	10/1/06	6/29/13	Jan-05	Ongoing
0481	DE - Acquired Brain Injury	HCBS Waiver for Individuals with Acquired Brain Injury	1915C	J	06	10/30/07	12/1/07	8/31/15	Jan-08	Ongoing
40159.90.R2	DE - Individuals with AIDS and other HIV-Related Diseases	HCBS Waiver for AIDS/HIV Clients	1915C	K	04	1/1/91	12/1/10	6/30/14	Jan-05	Ongoing
0009.90.R4	DE - Mental Retardation / Developmental Disabilities	HCBS Waiver for the Mentally Retarded/ Developmentally Disabled	1915C	L	05	7/1/89	7/1/09	6/30/14	Jan-05	Ongoing

## FLORIDA'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00135/4	Florida Family Planning 1115	Family Planning	1115	F	03	8/23/98	9/1/98	12/31/13	Jan-05	Ongoing
11-W-00117/4*	Florida Consumer Directed Care Plus	Consumer Directed Care	1115	1	01	10/9/98	3/1/08	2/28/12	Jan-05	Feb-08
11-W-00206/4	Florida Medicaid Reform	Florida Medicaid Reform	1115	1	22	10/19/05	9/1/06	6/30/11	Jul-08	Ongoing
NP	Florida MEDS-AD 1115	NP	1115	1	23	11/22/05	1/1/06	12/31/13	Jan-07	Ongoing
FL01.R05	Florida Managed Care Waiver (Medipass) 1915 (b)	Managed Care	1915B	2	05	1/1/90	7/1/08	6/30/11	Jan-05	Ongoing
FL-12-R01	Florida Statewide Inpatient Psychiatric Program (SIPP)	Statewide Inpatient Psychiatric Program (SIPP)	1915B	2	18	6/8/01	1/1/08	12/31/12	Jan-05	Ongoing
FL06	Florida Coordinated Non Emergency Transportation 1915(b)	Non-Emergent Transportation	1915B	2	07	6/7/01	4/1/08	3/31/11	Jan-05	Ongoing
0010.R06.00	FL Aged and Disabled Adult	Aged and Disabled Adult	1915C	G	10	7/1/93	7/1/08	6/30/15	Jan-05	Ongoing
0280.R03.00	FL Assisted Living for the Elderly	Assisted Living for the Elderly	1915C	G	13	7/1/94	1/1/08	12/31/12	Jan-05	Ongoing
0116.R05.00	FL Channeling for the Frail Elderly	Channeling	1915C	H	11	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
0315.90.04	FL - Nursing Home Diversion	Nursing Home Diversion	1915C	H	12	7/1/98	7/1/06	6/30/11	Jan-05	Ongoing
40166.90.R2	FL - Model Waiver	Model/Children Special Care	1915C	I	19	7/1/91	7/1/10	6/30/15	Jan-05	Ongoing
0342.90.R1	FL - HCB Waiver for Traumatic Brain Injury & Spinal Cord	Traumatic Brain Injury/Spinal Cord Inquiry	1915C	J	15	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0194.R04.00	FL Project AIDS Care	Project AIDS Care (PAC)	1915C	K	14	1/1/90	1/1/08	12/31/13	Jan-05	Ongoing
0010b.91.R4	FL - Developmental Services HCBS Waiver	Developmental Disabilities (DD)	1915C	L	08	7/1/93	7/1/03	6/30/13	Jan-05	Ongoing
0294.R03.00	FL Family and Supported Living (Tier 4)	Community Supported Living (DD)	1915C	L	09	10/1/95	10/1/08	9/30/13	Jan-05	Ongoing
0392.02	FL - Adult Cystic Fibrosis	Adult Cystic Fibrosis	1915C	L	16	10/1/02	7/1/07	6/30/12	Dec-05	Ongoing
40205.R01.00	FL Familial Dysautonomia Waiver	NP	1915C	L	No ID	6/14/06	1/1/10	12/31/14	NR	NR
0482	FL DD HCBS Tier 2	NP	1915C	NP	No ID	NP	2/14/08	2/13/16	NR	NR
0483	FL DD HCBS Tier 3	NP	1915C	NP	No ID	NP	2/14/08	2/13/16	NR	NR
1010	NP	NP	1915C	NP	No ID	NP	7/1/08	11/19/12	NR	NR
0447	NP	NP	1915C	NP	No ID	NP	11/1/08	10/31/11	NR	NR
FL14.R02 and 0418.R01.01	Alzheimer's Medicaid Home and Community Based Waiver Program	Alzheimer's Disease	1915BC	4	20	3/1/05	3/1/08	2/28/13	Jan-06	Ongoing
FL13.R01 and 0406.01	FL - Comprehensive Adult Day Health Care Program	Adult Day Health Care	1915BC	4	17	3/18/03	4/1/07	6/30/12	Sep-06	Ongoing

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\*Represents waiver that was active in 2008, but not active in 2009.

**GEORGIA'S 2009 MEDICAID WAIVERS**

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Mental Health / Mental Retardation Preadmission Screening and Resident Review (PASRR) Program	Capitated Waiver Program Waiver	1915B	2	PR	4/1/94	10/1/05	9/30/09	Jan-05	Jun-09
0112.R05.02	GA Elderly and Disabled	Home and Community Based Waiver - Community Care Service Waiver (CCSP)	1915C	G	CC	10/1/84	10/1/07	6/30/13	Jan-05	Ongoing
4170.90.R2	GA - Independent Care Waiver for Disabled Adults	Home and Community Based Waiver for Disabled Adults-Independent Care Waiver Program (ICWP)	1915C	I	IC	4/1/92	4/1/06	6/30/13	Jan-05	Ongoing
0175.R04.01	GA New Options Waivers	Home and Community Based Waiver for Disabled Persons-Mental Retardation Waiver Program (MRWP)	1915C	L	MR	4/1/92	10/1/07	6/30/13	Jan-05	Ongoing
0323.90.R1	GA - Mental Retardation / Developmental Disabilities	Home and Community Based Waiver for Disabled Children-Community Habilitation and Support Services (CHSS)	1915C	L	CH	10/1/97	1/1/11	6/30/13	Jan-05	Ongoing
01.R01.00	GA Community Based Alternatives for Youth	Community Based Alternatives for Youth (CBAY)	1915C	M	CB	9/1/05	9/1/08	8/31/13	NR	NR
4116.R04.00	GA - Home & Community-Based Waiver for Disabled Children	Home and Community Based Waiver for Disabled Children-Georgia Pediatric Program (GAPP) Waiver	1915C	N	PP	4/1/85	4/1/08	6/30/13	Jan-05	Ongoing

NP = Not Provided  
NR = Not Reported

## HAWAII'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00001/9	Hawaii QUEST 1115	Comprehensive State Health Reform Waivers under 1115 Authority Hawaii QUEST	1115	I	H1	7/16/93	2/1/08	6/30/13	Jan-05	Ongoing
0014	HI - Residential Alternatives Community Care Program	HCBS Waivers under 1915C Authority Aged and Disabled (RACCP)	1915C	G	H3	8/1/94	NP	1/31/09	Jan-05	Feb-09
0057.90.R3	HI - Nursing Home Without Walls	HCBS Waivers under 1915C Authority Aged and Disabled (NHWW)	1915C	G	H4	10/1/92	NP	1/31/09	Jan-05	Feb-09
0182.90.R3	HI - Home & Community-Based HIV Community Care (HCCP) Waiver Program	HCBS Waivers under 1915C Authority AIDS/ARC (HCCP)	1915C	K	H5	6/1/92	NP	1/31/09	Jan-05	Jan-09
0013.90.R3.03	HI - Developmental Disabilities / Mental Retardation	HCBS Waivers under 1915C Authority MR/DD	1915C	L	H2	7/1/89	NP	6/30/16	Jan-05	Ongoing
40195.90 *	HI - Medically Fragile Community Care Program (MFCCP)	HCBS Waivers under 1915C Authority Medically Fragile Community Care Waiver Program (MFCCP)	1915C	N	H6	3/3/00	NP	1/31/09	Jan-05	Dec-08

NP = Not Provided

\* Represents waivers that were active in 2008 but were not active in 2009.



## IDAHO'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00187/10	Children's Access Card Demonstration	AccessCard Kids	HIFA	5	No ID	11/4/04	9/1/10	8/31/13	NR	NR
0076A.90.R3A.01	ID - Aged and Disabled	PCS Aged/Disabled Waiver	1915C	G	01	10/1/92	10/1/07	9/30/12	Jan-05	Ongoing
0076A.90.R3A.01	ID - Aged and Disabled	HCBS/PCS Aged/Disabled Waiver	1915C	G	02	10/1/92	10/1/07	9/30/12	Jan-05	Ongoing
1076.90.R04.01	ID - Developmental Disabilities Waiver	Developmental Disabilities Waiver	1915C	L	03	10/1/92	10/1/07	3/31/12	Jan-05	Ongoing
1076.90.R04.01	ID - Developmental Disabilities Waiver	HCBS / Developmental Disabilities Waiver	1915C	L	04	10/1/92	10/1/07	3/31/12	Jan-05	Ongoing
1076.90.R04.01	ID - Developmental Disabilities Waiver	HCBS Mental Retardation / Developmental Disabilities Waiver	1915C	L	13	10/1/92	10/1/07	3/31/12	Jun-07	Ongoing
40187.90.R1	ID	Idaho State School and Hospital Waiver	1915C	L	05	7/1/96	6/30/09	6/30/09	Jan-05	Jun-09
40187.90.R1	ID	HCBS/Idaho State School and Hospital Waiver	1915C	L	06	7/1/96	6/30/09	6/30/09	Jul-07	Jun-09

NR = Not Reported

## ILLINOIS'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00165/5	Illinois Family Planning 1115	Family Planning Expansion Project	1115	F	A3	6/23/03	1/1/10	3/31/12	Jan-05	Ongoing
0326.R02.00	IL Supportive Living Program	Home and Community Based Service Waiver for Supportive Living Facilities (SLFs)	1915C	G	B5	7/1/99	7/1/07	12/31/13	Jan-05	Ongoing
0143.90.R3	IL - HCBS Waiver for the Elderly	Home and Community Based Service Waiver for Persons that are Elderly	1915C	H	B2	10/1/89	10/1/09	9/30/14	Jan-05	Ongoing
0142.90.R3	IL - HCBS Waiver for Persons with Physical Disabilities	Home and Community Based Service Waiver for Persons with Disabilities	1915C	I	B1	10/1/89	10/1/09	9/30/14	Jan-05	Ongoing
0329.R03.00	IL HCBS Waiver for Persons w/Brain Injury	Home and Community Based Service Waiver for Persons with Brain Injury	1915C	J	B6	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0202.R03.00	IL HCBS Waiver for Persons w/HIV or AIDS	Home and Community Based Service Waiver for Persons with HIV or AIDS	1915C	K	B3	10/1/90	10/1/08	10/31/13	Jan-05	Ongoing
0350.R02.01	IL Waiver for Adults w/DD	Home and Community Based Service Waiver for Adults with Developmental Disabilities	1915C	L	B7	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0464.R00.01	IL Support Waiver for Children and Young Adults w/DD	IL Support Waiver for Children and Young Adults w/DD	1915C	L	D1	5/30/07	7/1/07	6/30/15	Jan-08	Ongoing
0473.R00.01	IL Residential Waiver for Children and Young Adults w/DD	IL Residential Waiver for Children and Young Adults w/DD	1915C	L	D2	5/30/07	7/1/07	6/30/15	Jan-08	Ongoing
0278.R03.00	IL HCBS Waiver for Children that are Medically Fragile, Technology Dependent	Home and Community Based Service Waiver for Children that are Medically Fragile, Technology Dependent	1915C	N	B4	9/1/94	9/1/07	10/31/13	Jan-05	Ongoing

## INDIANA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00237/5	Healthy Indiana Plan	TANF	1115	1	4A	12/14/07	1/1/08	12/31/12	Jan-08	Ongoing
11-W-00237/5	Healthy Indiana Plan	Healthy Indiana Program- Care Taker	1115	1	4B	12/14/07	1/1/08	12/31/12	Jan-08	Ongoing
11-W-00237/5	Healthy Indiana Plan	Healthy Indiana Program- Non Care Taker	1115	1	4C	12/14/07	1/1/08	12/31/12	Jan-08	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	MCHIP	1915B	2	3B	9/13/93	NP	12/31/10	Oct-07	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Aged Dual	1915B	2	3C	9/13/93	NP	12/31/10	Nov-07	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Blind and Disabled Dual	1915B	2	3D	9/13/93	NP	12/31/10	Nov-07	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Aged; Blind and Disabled Non Dual	1915B	2	3E	9/13/93	NP	12/31/10	Oct-07	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Other	1915B	2	3F	9/13/93	NP	12/31/10	Oct-07	Ongoing
0210.90.R2.01	IN Aged and Disabled	Aged and Disabled Waiver	1915C	G	AD	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
40197.R02.00	IN Traumatic Brain Injury	Traumatic Brain Injury Waiver	1915C	J	TB	1/1/00	1/1/08	12/31/12	Jan-05	Ongoing
0378.90	NP	Developmentally Disabled Waiver	1915C	L	DD	NP	10/1/09	9/30/14	Jan-05	Ongoing
0387	NP	Support Services Waiver	1915C	L	SS	NP	4/1/05	3/31/15	Jan-05	Ongoing
4151.R04.00	IN Autism	Autism Waiver	1915C	P	AU	1/1/90	1/1/08	6/30/12	Jan-05	Ongoing

NP = Not Provided

## IOWA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00188/7	Iowa Family Planning 1115	Family Planning	1115	F	W1	1/10/06	2/1/06	11/30/11	Jan-06	Ongoing
11-W-00189/7	IowaCare 1115	Iowa Care	1115	1	X1	6/30/05	7/1/10	12/31/13	Jul-05	Ongoing
11-W-00189/7	IowaCare 1115	Children's Mental Health Waiver	1115	1	H1	6/30/05	7/1/10	12/31/13	Oct-06	Ongoing
A 71IA	Iowa Plan	Iowa Plan - Behavioral Health	1915B	2	I1	12/9/98	7/1/09	6/30/16	Jan-05	Ongoing
4155.R05.00	IA - Elderly Waiver	Elderly	1915C	H	C1	8/1/90	8/1/08	6/30/13	Jan-05	Ongoing
4111.91.R4	Iowa Ill and Handicapped	Ill and Handicapped	1915C	I	A1	8/1/92	NP	6/30/13	Jan-05	Ongoing
0345.R02.00	IA HCBS Waiver for Persons w/Physical Disabilities	Physical Disability	1915C	I	P1	8/1/99	8/1/07	6/30/13	Jan-05	Ongoing
0299.90.R01.03	IA - Brain Injury Waiver	Brain Injury	1915C	J	E1	10/1/96	10/1/09	9/30/14	Jan-05	Ongoing
0213.R03.02	Iowa AIDS/HIV	AIDS	1915C	K	B1	7/1/95	7/1/10	6/30/13	Jan-05	Ongoing
0242.90.R02.02	IA - Mental Retardation Waiver	Mental Retardation	1915C	L	D1	7/1/99	7/1/09	6/30/14	Jan-05	Ongoing

## KANSAS'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0303.R02.02	HCBS for the Frail Elderly	Frail Elderly	1915C	H	FE	1/1/97	1/1/10	12/31/14	Jan-05	Ongoing
0304.90.R1	KS - Physical Disabilities	Physically Disabled	1915C	I	PD	1/1/97	1/1/10	12/31/14	Jan-05	Ongoing
4164.90.R02.02	KS - Head Injury	Head Injury	1915C	J	HI	7/1/86	7/1/09	6/30/14	Jan-05	Ongoing
0224.90.R2	Kansas Mental Retardation / Developmental Disabilities	Developmentally Disabled	1915C	L	DD	7/1/94	7/1/09	6/30/14	Jan-05	Ongoing
0320.90.R02.04	KS - Severe Emotional Disturbance (SED) HCBS Waiver	Severely Emotionally Disabled	1915C	M	SE	10/1/97	7/1/08	9/30/15	Jan-05	Ongoing
4165.R04.00	KS Technology Assisted	Technology Assisted	1915C	N	TA	3/1/94	8/1/08	7/31/13	Jan-05	Ongoing
0476.R00.00	KS Autism	Autism Waiver	1915C	P	AU	9/25/07	1/1/08	12/31/15	Jan-08	Ongoing

## KENTUCKY'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Kentucky Health Care Partnership 1115	Kentucky Health Care Partnership 1115	1115	I	MC	12/9/93	10/30/08	12/31/12	Jan-05 Oct-07	Sep-05 Ongoing
0144.R04.02	KY - H &CB Waiver for Elderly & Disabled Individuals	HCB Waiver	1915C	G	HB	1/1/90	7/1/10	6/30/15	Jan-05	Ongoing
0333.03	KY - Brain Injuries Waiver	Acquired Brain Injury (Acute)	1915C	J	BI	1/1/90	7/1/08	12/31/11	Jan-05	Ongoing
0477.01	NP	Acquired Brain Injury (Long Term)	1915C	J	BL	3/1/08	7/1/08	6/30/16	Dec-08	Ongoing
0314.90.R1	KY - Supports for Community Living	SCL (Support for Community Living) Waiver	1915C	L	SC	1/1/90	9/1/10	8/31/15	Jan-05	Ongoing
0475.01	NP	Michelle P. Waiver	1915C	L	MP	7/1/08	7/1/08	8/31/16	Jul-08	Ongoing
40146.90.R2.01	KY - Model Waiver II	Model Waiver II	1915C	N	MW	1/1/90	10/1/10	9/30/15	Jan-05	Ongoing

NP = Not Provided

## LOUISIANA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00232/6	Louisiana Family Planning 1115	Take Charge (Family Planning Demonstration)	1115	F	FP	6/1/06	8/31/07	8/30/11	Oct-06	Ongoing
0121.90.R4	LA Adult Day Health Care	Adult Day Health Care	1915C	G	01	1/1/93	7/1/07	6/30/14	Jan-05	Ongoing
0257.90.R4	LA - Elderly and Disabled Adult Waiver (EDA)	Elderly & Disabled Adult	1915C	G	04	7/1/93	NP	12/31/12	Jan-05	Ongoing
0361.R2	LA - Children's Choice	Children's Choice	1915C	L	05	2/21/01	3/25/09	12/31/12	Jan-05	Ongoing
0401.90	LA New Opportunities Waiver	NOW	1915C	L	06	4/24/03	7/1/06	12/31/12	Jan-05	Ongoing
0453.R00.03	LA Supports Waiver	Supports Services	1915C	L	07	7/1/06	7/1/09	2/28/13	Jul-06	Ongoing

NP = Not Provided

## MAINE'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00158/1	MaineCare for Childless Adults HIFA	MaineCare for Childless Adults	1115	5	11	9/13/02	10/1/01	12/31/13	Jan-05	Ongoing
11W00128/1	Maine - HIV/AIDS	HIV	1115	1	10	2/24/00	7/1/02	12/31/13	Jan-05	Ongoing
0276.RO3.00	ME Elderly and Adults with Disabilities	Disabled and Elderly	1915C	G	20	7/1/94	7/1/08	6/30/13	Jan-05	Ongoing
0127.90.R3.01	ME - CD-PAS Waiver	Physically Disabled	1915C	I	22	7/1/94	7/1/09	6/30/15	Jan-05	Ongoing
0159.90.R3	ME - Mental Retardation Waiver	Mental Retardation / Developmental Disabilities	1915C	L	21	7/1/95	NP	8/31/15	Jan-05	Ongoing
0467	Autism Waiver	Autism Waiver	1915C	P	29	NP	1/1/08	6/30/15	Jan-08	Ongoing

NP = Not Provided



## MARYLAND'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00099/3	Maryland Health Choice 1115	Maryland Health Choice 1115	1115	I	HC	6/2/97	8/28/08	12/31/13	Jan-05	Ongoing
11-W-00099/3	Maryland Health Choice 1115	Family Planning	1115	F	HC	6/2/97	8/28/08	12/31/13	Jan-05	Ongoing
0265.90.R1.05	MD - Waiver for Older Adults	Waiver for Older Adults	1915C	G	OA	7/1/93	NP	9/30/13	Jan-05	Ongoing
0645.R00.00	MD - Medicaid Day Care Services	NP	1915C	G	MD	6/11/08	7/1/08	6/30/14	Jan-08	Ongoing
0353.90.01	MD - Living at Home: Maryland Community Choices	Living at Home Waiver	1915C	I	HM	4/1/01	7/1/09	6/30/15	Jan-05	Ongoing
40198.02	MD - Waiver for Adults with Traumatic Brain Injury	Waiver for Individuals with Traumatic Brain Injury	1915C	J	TB	3/1/03	7/1/06	6/30/13	Jan-05	Ongoing
0023.R05.00	MD Community Pathways	Community Pathways Waiver	1915C	L	CP	7/1/84	7/1/08	6/30/13	Jan-05	Ongoing
0424.R01.00	MD New Directions Independence Plus	New Directions Waiver	1915C	L	ND	7/1/05	7/1/08	6/30/13	Apr-06	Ongoing
40118.R05.00	MD Model Waiver for Fragile Children	Model Waiver for Medically Fragile Children	1915C	N	MW	7/1/85	7/1/08	6/30/13	Jan-05	Ongoing
0339.90	MD - Waiver for Children with Autism Spectrum Disorder	Waiver for Children with Autism Spectrum Disorder	1915C	P	AU	7/1/01	7/1/09	6/30/15	Jan-05	Ongoing

NP = Not Provided

## MASSACHUSETTS'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Basic	1115	I	B	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - CommonHealth	1115	I	C	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	Base Disabled	1115	I	D	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Essential	1115	I	E	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Family Assistance, Base Family	1115	I	F	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - HIV	1115	I	H	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - IP	1115	I	I	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	Base MCB	1115	I	M	4/24/95	7/1/97	6/30/11	Jan-05	Jun-09
11-W-00030/1	Massachusetts MassHealth 1115	Commonwealth Care	1115	I	N	4/24/95	7/1/97	6/30/11	Jan-08	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 ( r ) 2 Kids	1115	I	1	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 ( r ) 2 Disabled	1115	I	2	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 ( r ) 2 Breast and Cervical Cancer Treatment Program	1115	I	3	4/24/95	7/1/97	6/30/11	Jan-05	Ongoing
0059.90.R3.01	MA - HCBS Waiver for Elders	HCBS - DEA	1915C	H	S	1/1/94	1/1/09	12/31/13	Jan-05	Dec-08
0359.90	MA - Traumatic Brain Injury	HCBS - Traumatic Brain Injury	1915C	J	T	7/1/01	7/1/09	6/30/13	Jan-05	Dec-08
0064.92.R4	MA Mental Retardation - Adult Waiver	HCBS - Department of Mental Retardation	1915C	L	R	7/1/84	7/1/07	6/30/12	Jan-05	Dec-08
40207	MA Children's Autism Spectrum Disorder	NP	1915C	P	No ID	10/1/07	10/1/10	9/30/15	NR	NR

NP = Not Provided

NR = Not Reported

## MICHIGAN'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
21-W-00017-5	Michigan Adult Benefits Waiver HIFA	Michigan Adult Benefits Waiver	HIFA	5	AB	1/16/04	1/16/04	12/31/09	Jan-05	Ongoing
11-W-00215/5	None Provided	Michigan Plan First! Family Planning Program	1115	F	FP	3/1/06	NP	6/30/11	Jul-06	Ongoing
MI-11.R03	Michigan Comprehensive Health Care Program 1915(b)	Michigan Comprehensive Health Care Program	1915B	2	MC	10/10/96	NP	In Review	Jan-05	Ongoing
MI-14.R03	Michigan Specialty Services and Supports Waiver Program	Michigan Specialty Services and Supports Waiver Program	1915B	2	MH	6/26/98	10/1/07	4/30/11	Jan-07	Ongoing
0233.R03.00	MI Choice	MI Choice (Home and Community Based Care)	1915C	G	HC	4/1/95	10/1/07	6/30/13	Jan-05	Ongoing
4119.90.R2.03	MI - Children's HCBS Waiver	MI - Children's HCBS Waiver	1915C	L	CW	10/1/88	NP	9/30/15	Jan-05	Ongoing
0438.R01.00	MI Waiver for Children w/ Serious Emotional Disturbance	MI - HCBS Waiver for Seriously Emotionally Disturbed Children	1915C	M	SD	10/1/05	10/1/08	3/31/10	Oct-07	Ongoing
0167.90.R3	MI - Habilitation Supports	MI - Habilitation Supports	1915BC	4	HS	10/1/90	NP	6/30/13	Jan-07	Ongoing

NP = Not Provided

## MINNESOTA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11 -W-00183/5	Minnesota Family Planning Project	Family Planning	1115	F	FP	6/20/04	7/1/06	6/30/11	Jul-06	Ongoing
11-W-00039/5	Minnesota Prepaid Medical Assistance Project Plus	MinnesotaCare Health Care Reform Waiver	1115	1	B1	4/27/95	7/1/95	6/30/11	Jan-05	Ongoing
MN01	Consolidated Chemical Dependency Treatment Fund (CCDTF)	Consolidated Chemical Dependency Treatment Fund Waiver	1915B	2	F1	1/1/88	1/1/88	3/31/09	Jan-05	Ongoing
NP	Minnesota Senior Care Project	Minnesota PPHP Elderly Basic Care	1915B	2	EB	6/30/05	4/1/05	6/30/11	Jan-08	Ongoing
0025.91.R4.02	MN - Elderly Waiver	Elderly Waiver	1915C	H	M2	7/22/98	NP	9/30/13	Jan-05	Ongoing
0166.90.R3	MN - Community Alternatives for Disabled Individuals	Community Alternatives for Disabled Individuals Waiver	1915C	I	M3	10/1/90	NP	12/31/10	Jan-05	Ongoing
4128	NP	Community Alternative Care Waiver	1915C	I	H2	NP	NP	9/30/13	Jan-05	Ongoing
4169.90.R1.08	MN - Traumatic Brain Injury (TBI)	Traumatic Brain Injury Waiver	1915C	J	M4	4/1/92	NP	3/31/11	Jan-05	Ongoing
0061	NP	Developmental Disabilities	1915C	L	H1	NP	NP	9/30/13	Jan-05	Ongoing
NP	Minnesota Senior Care Project	Minnesota Senior Care	1915BC	4	SC	6/30/05	4/1/05	6/30/11	Apr-05	Ongoing
NP	NP	Case Management (CM) Waiver	1915BC	4	No ID	1/1/07	NP	12/31/10	NR	NR

NP = Not Provided

NR = Not Reported

## MISSISSIPPI'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00157-4	Mississippi Family Planning 1115	Family Planning	1115	F	01	1/31/03	10/1/08	11/30/11	Jan-05	Ongoing
11W00185/4	Healthier Mississippi	Healthier Mississippi	1115	I	02	9/10/04	10/1/04	12/31/13	Jan-05	Ongoing
0272.R03.00	MS Elderly and Disabled	Mississippi HCBS Waiver: Aged/Disabled	1915C	G	05	7/1/94	7/1/07	6/30/12	Jan-05	Ongoing
0355.R02.00	MS - Assisted Living	Mississippi HCBS Waiver: Assisted Living for the Elderly	1915C	G	07	10/1/00	10/1/08	6/30/12	Jan-05	Ongoing
0255.R03	MS0255R0300	Mississippi HCBS Waiver: Independent Living	1915C	G	04	1/1/94	7/1/07	1/1/12	Jan-05	Ongoing
0366.90	MS - Traumatic Brain Injury / SCI	Mississippi HCBS Waiver: Traumatic Brain Injury	1915C	J	08	7/1/01	7/1/09	12/31/12	Jan-05	Ongoing
0282.R03.00	MS Intellectual Disabilities / Developmental Disabilities	Mississippi HCBS Waiver: Mental Retardation / Developmental Disabilities	1915C	L	06	7/1/95	7/1/08	6/30/12	Jan-05	Ongoing

## MISSOURI'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	Missouri Family Planning 1115 Waiver	NP	1115	F	D1	10/15/07	10/1/07	12/31/13	Oct-07	Ongoing
MO03.R03.M03	Missouri Managed Care Plus	1915b Capitated Waiver	1915B	2	B1	10/1/95	7/1/08	6/30/12	Jan-05	Ongoing
0026.90.R4	MO - Aged and Disabled Waiver	Aged & Disabled Waiver	1915C	G	C1	4/22/93	NP	6/30/13	Jan-05	Ongoing
0346.90	MO - Independent Living	Independent Living Waiver	1915C	I	C4	1/1/03	1/1/08	12/31/12	Apr-05	Ongoing
40190.90.R1	MO - Physical Disabilities Waiver	Physical Disabilities Waiver	1915C	I	C7	7/1/98	NP	6/30/16	Jan-08	Ongoing
0197.90.R04.00	MO - AIDS	AIDS Waiver	1915C	K	C2	7/1/89	7/1/07	6/30/12	Jan-05	Ongoing
0404.R01.02	MO - Community Support Waiver	Community Support Waiver	1915C	L	C3	7/1/03	7/1/06	6/30/16	Jan-05	Ongoing
40185.R03.00	MO Children w/ Developmental Disabilities (MOCDD)	MOCDD (Sarah Lopez Waiver)	1915C	L	C5	10/1/95	10/1/08	9/30/13	Jan-05	Ongoing
0178.R03.01	MO Mental Retardation / Developmental Disabilities Comprehensive	Mental Retardation / Developmental Disabilities Waiver	1915C	L	C6	7/1/88	7/1/06	6/30/16	Jan-05	Ongoing
0698.R00.00	MO Autism	MO Autism	1915C	P	NR	6/30/09	NR	6/30/12	NR	NR

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NR = Not Reported

## MONTANA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00181/8	Montana Basic Medicaid for Able Bodied Adults	Basic Medicaid for Able-Bodied Adults	1115	1	MB	1/29/04	2/1/04	1/31/13	Jan-05	Ongoing
NP	Montana Passport to Health 1915(b)	Passport to Health, Health Improvement and Nurse First Programs	1915B	2	MC	8/31/93	12/1/07	3/31/12	Jan-05	Ongoing
0148.90.R2	MT	Montana HCBS Waiver: EPH (0148)	1915C	G	MD	10/1/89	7/1/06	6/30/12	Jan-05	Ongoing
0208.90.R2	MT	Montana HCBS Waiver: Mental Retardation / Developmental Disabilities (0208)	1915C	L	ME	7/1/93	7/1/08	8/31/12	Jan-05	Ongoing
0371.90	MT - Community Supports Waiver	Montana HCBS Waiver: Developmental Disabilities Age 18 and Older	1915C	L	MF	9/1/01	7/1/09	9/30/13	Jan-05	Ongoing
0455.R01.00	Montana Behavioral Health Waiver for Adults w/ Severe Disabling Mental Illness	NP	1915C	M	MH	11/27/06	12/1/06	6/30/15	Oct-08	Ongoing
0667.R00.00	MT Children's Autism Waiver	NP	1915C	P	D6	12/29/08	1/1/09	12/31/11	Jun-09	Ongoing

NP = Not Provided

## NEBRASKA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NE03.R04	Health Connection MH/SA Waiver	Nebraska Health Connection	1915B	2	01	7/1/95	7/1/95	6/30/11	Jan-05	Ongoing
0187.90.R3	NE - Aged and Disabled Adults and Children	Aged and Disabled Waiver	1915C	G	02	8/1/91	NP	1/31/11	Jan-05	Ongoing
40199.R02.00	NE Traumatic Brain Injury	Traumatic Brain Injury Waiver	1915C	J	08	5/1/00	10/1/08	6/30/11	Jan-05	Ongoing
0396	NP	Waiver for Adults with Developmental Disabilities - Comprehensive	1915C	L	03	12/19/05	NP	6/30/11	Jan-05	Ongoing
0395	NP	Waiver for Adults with Developmental Disabilities - Residential	1915C	L	04	12/19/05	NP	6/30/11	Jan-05	Ongoing
0394	NP	Waiver for Adults with Developmental Disabilities - Day	1915C	L	05	12/19/05	NP	9/30/15	Jan-05	Ongoing
4154.R04.00	NE HCBS Waiver for Children w/ Developmental Disabilities and their Families	Waiver for Children with Developmental Disabilities	1915C	L	06	6/1/89	6/1/07	6/30/11	Jan-05	Ongoing
0246	NE - Early Intervention Waiver	Early Intervention Waiver	1915C	L	07	1/13/95	NP	1/31/09	Jan-05	Jan-09
0454	NE Community Supports Waiver Program for Adults w/DD	Developmental Disabilities Community Supports Program	1915C	L	09	7/10/06	8/1/09	6/30/11	Apr-08	Ongoing

NP = Not Provided



## NEVADA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0452.R01.00	NV Assisted Living	Assisted Living Waiver	1915C	H	AL	7/1/06	7/1/09	6/30/14	Jul-06	Ongoing
0267.90.R..01	NV - Elderly in Adult Residential Care	HCBW for the Elderly in Adult Residential Care (WEARC)	1915C	H	WE	7/1/93	7/1/06	9/30/14	Jan-05	Ongoing
0152.90.R3	NV - HCBS Waiver for the Frail Elderly	HCBW for the Frail Elderly (CHIP)	1915C	H	CH	7/1/95	NP	6/30/14	Jan-05	Ongoing
4150.R04.00	NV - HCBS Waiver for the Physically Disabled	HCBW for People with Physical Disabilities (WIN)	1915C	I	WI	1/1/93	1/1/08	8/31/13	Jan-05	Ongoing
0125.90.R3	NV - HCBS Waiver for Persons with MR & Related Conditions	HCBW Serving Persons with Mental Retardation and Related Conditions (MRRC)	1915C	L	MR	10/1/93	10/1/08	2/28/13	Jan-05	Ongoing

NP = Not Provided

## NEW HAMPSHIRE'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0060.R05.00	NH Home and Community Based Care for the Elderly and Chronically Ill	Elderly & Chronically Ill - From Community	1915C	G	AC	7/1/84	7/1/07	6/30/11	Jan-05	Ongoing
0060.R05.00	NH Home and Community Based Care for the Elderly and Chronically Ill	Elderly & Chronically Ill - From Nursing Home	1915C	G	AD	7/1/84	7/1/07	6/30/11	Jan-05	Ongoing
4177.90.R2	NH Individuals w/ Acquired Brain Disorders	Acquired Brain Injury - From Nursing Home	1915C	J	BB	11/1/93	11/1/06	6/30/11	Jan-05	Ongoing
4177.90.R2	NH Individuals w/ Acquired Brain Disorders	Acquired Brain Injury - From Community	1915C	J	BC	11/1/93	11/1/06	6/30/11	Jan-05	Ongoing
0053E.90.R3	NH Individuals w/ Developmental Disabilities	Mental Retardation / Developmental Disabilities - From Community	1915C	L	AA	9/1/91	9/1/06	1/31/13	Jan-05	Ongoing
0053E.90.R3	NH Individuals w/ Developmental Disabilities	Mental Retardation / Developmental Disabilities - From Nursing Home	1915C	L	AB	9/1/91	9/1/06	1/31/13	Jan-05	Ongoing
0397.IP.90	NH - Home Support Waiver for Children with Developmental Disabilities	Home Support Waiver for Children with Developmental Disabilities - Child from Community	1915C	L	CC	1/1/03	NP	6/30/11	Jan-05	Ongoing
0397.IP.90	NH - Home Support Waiver for Children with Developmental Disabilities	Home Support Waiver for Children with Developmental Disabilities - Child from Community	1915C	L	CI	1/1/03	NP	6/30/11	NR	NR

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## NEW JERSEY'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
21-W-00003/2-01	New Jersey Family Coverage Under SCHIP for Families with Pregnant Women	Family Care NJSCHIP - Demo	1115	1	08	1/18/01	1/18/01	3/31/09	Jan-05	Ongoing
21-W-00003/2-01	New Jersey Family Coverage Under SCHIP for Families with Pregnant Women	Health Insurance Flexibility and Accountability Demonstration Initiative.	1115	5	08	1/31/03	1/31/03	3/31/09	Jan-07	Ongoing
11-W-00118/2*	New Jersey Cash and Counseling Demonstration	Personal Preference Program	1115	1	11	10/9/98	NP	4/30/08	Jan-05	Dec-08
NJ03	NJ FamilyCare	NJCARE 2000+	1915B	2	09	11/2/99	10/1/00	3/31/11	Jan-05	Ongoing
0285.90.R1A*	NJ - Enhanced Community Options	Enhanced Community Options	1915C	G	06	1/1/96	NP	12/31/09	Jan-05	Dec-08
0032.R04.01	NJ Global Options for Long Term Care	Global Options	1915C	G	12	10/1/88	1/1/09	7/31/13	Jan-06	Ongoing
0032.91.R3*	NJ - Community Care Program for the Elderly and Disabled	Community Care Program for the Elderly & Disabled	1915C	G	07	10/1/91	NP	12/31/08	Jan-05	Dec-08
4133.90.R3	NJ - Community Resources for People with Disabilities	Community Resources for People with Disabilities	1915C	I	04	4/1/94	4/1/09	3/31/14	Jan-05	Ongoing
4174.90.R1	NJ - The Traumatic Brain Injury Waiver	Traumatic Brain Injury Waiver	1915C	J	05	7/1/96	7/1/06	6/30/12	Jan-05	Ongoing
0160.90.R2.02	NJ - AIDS Community Care Alternatives Program	AIDS Community Care Alternatives Program	1915C	K	02	3/1/91	3/1/07	2/29/12	Jan-05	Ongoing
0031.R01.00	NJ Renewal Waiver	DDD	1915C	L	01	10/1/93	10/1/08	9/30/13	Jan-05	Ongoing

NP = Not Provided

\*Represents waivers that were active in 2008, but were not active in 2009.

## NEW MEXICO'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
21-W-00012/6	New Mexico 1115 HIFA	State Coverage Initiative (SCI)	HIFA	5	02	8/23/02	7/1/05	9/30/14	Jul-05	Ongoing
11-W-00111/6	New Mexico Family Planning 1115	Family Planning Waiver	1115	F	03	8/1/97	7/1/98	1/31/11	Jan-05	Ongoing
11-W-00124/6	New Mexico CHIP Waiver	CHIP	1115	1	01	1/11/99	3/31/99	9/30/14	Jan-05	Ongoing
WM-NM 02.R05	New Mexico Salud 1915(b)	SALUD	1915B	2	04	7/1/97	7/1/09	6/30/11	Jan-05	Ongoing
WA-NM 03.R02	NM Behavioral Health Waiver	Behavioral Health	1915B	2	05	6/24/05	7/1/09	6/30/11	Jul-05	Ongoing
0169.90.R2.01	NM - 0169.90.R2.01	Disabled & Elderly HCBW	1915C	G	06	10/1/90	7/1/06	6/30/09	Jan-05	Jun-09
0449	NM Mi Via Nursing Facility	NP	1915C	G	10	9/21/06	10/1/09	3/31/13	Jan-08	Ongoing
0161.90.R2	NM - HCBS Waiver for Individuals with AIDS	AIDS HCBW	1915C	K	08	7/1/94	NP	6/30/15	Jan-05	Ongoing
0173.90.R2.01	NM - 0173.90.R2.01	Developmentally Disabled HCBW	1915C	L	07	2/24/91	7/1/06	6/30/12	Jan-05	Ongoing
0448	NM Mi Via	NP	1915C	L	11	9/21/06	10/1/09	2/28/13	Jan-08	Ongoing
0223.90.R2	NM - HCBS Waiver for Medically Fragile Children	Medically Fragile HCBW	1915C	N	09	10/1/90	NP	6/30/15	Jan-05	Ongoing
0479.R00.00	NM Coordinated Long Term Services	CoLTS	1915BC	4	12	7/29/08	8/1/08	7/31/10	Aug-08	Ongoing

NP = Not Provided

## NEW YORK'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00114/2	New York Partnership Plan	Partnership Plan	1115	I	01	7/15/97	10/1/97	12/31/14	Jan-05	Ongoing
11-W-00114/2	New York Partnership Plan	Family Planning	1115	F	10	7/15/97	10/1/97	12/31/14	Jan-05	Ongoing
0034.90.R4	NY - 0034	LTHHCP	1915C	G	09	1/1/94	NP	8/31/15	Jul-06	Ongoing
0444	NY Nursing Home Transition and Diversion Medicaid Waiver	NP	1915C	G	11	7/30/07	9/1/07	8/31/14	Jul-08	Ongoing
4125.90R2	NY - Care at Home	CAH I&II	1915C	I	05	12/1/03	12/1/08	11/30/13	Jan-05	Ongoing
0269. R03.00	New York Traumatic Brain Injury	Traumatic Brain Injury Waiver	1915C	J	04	4/1/95	4/1/08	6/29/13	Jan-05	Ongoing
0238.90.01	NY - 0238.90.R2	HCBS	1915C	L	02	9/1/94	10/1/09	9/30/14	Jan-05	Ongoing
40163	NY - Care At Home III	CAH III	1915C	L	06	8/1/91	10/1/09	9/30/14	Jan-05	Ongoing
40176.R03.00	New York SOMRDD-CAHIV	CAH IV	1915C	L	07	9/1/94	10/1/07	9/30/12	Jan-05	Ongoing
40200.R02.00	NY CAH VI	CAH VI	1915C	L	08	3/1/00	3/1/08	2/28/13	Jan-05	Ongoing
0470	NY Bridges to Health for Children w/DD	NP	1915C	L	13	7/19/07	1/1/08	12/31/15	Oct-08	Ongoing
0296 .90. R1	NY - SED Children	OMH HCBS	1915C	M	03	1/1/96	1/1/09	12/31/13	Oct-08	Ongoing
0469	NY Bridges to Health for Children w/ SED	NY Bridges to Health for Children w/ SED	1915C	M	12	7/19/07	1/1/08	12/31/15	Oct-08	Ongoing
0471	NY Bridges to Health for Children who are Medically Fragile	NP	1915C	N	14	7/19/07	1/1/08	12/31/15	Oct-08	Ongoing

NP = Not Provided

## NORTH CAROLINA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00182/4	North Carolina Family Planning 1115	Family Planning	1115	F	FP	11/5/04	10/1/05	9/30/10	Oct-05	Ongoing
0423-IP.01**	North Carolina - Piedmont Behavioral Health Care	Piedmont Cardinal Health Plan	1915B	2	P2	10/6/04	4/1/09	3/31/13	Apr-05	Dec-08
0423-IP.01**	North Carolina - Piedmont Behavioral Health Care	Piedmont Cardinal Health Plan	1915B	2	P1	10/6/04	4/1/09	3/31/13	Jan-09	Ongoing
0132.R05.00	NC - Community Alternatives Program for Disabled Adults (CAP/DA)	CAP Disabled Adults	1915C	G	DA	10/1/82	10/1/08	12/31/12	Jan-05	Ongoing
0412-IP.01	NC - CAP Choice	CAP Choice	1915C	G	CH	1/1/04	4/1/08	3/31/13	Feb-05	Ongoing
0151.90.R2.02*	NC - Mental Retardation / Developmental Disabilities	CAP Mental Retardation / Developmental Disabilities	1915C	L	MR	7/1/90	NP	6/30/11	Jan-05	Sep-08
0663.R00.00	NC Supports Waiver (3.5)	CAP MR/DD Supports Waiver (Tier 1)	1915C	L	C2	10/24/08	11/1/08	6/30/11	Nov-08	Ongoing
0662.R00**	CAP/MR Comprehensive- Tier 2	CAP MR/DD Comprehensive Waiver (Tier 2)	1915C	L	CM	10/24/08	11/1/08	6/30/11	Oct-08	Dec-08
0662.R00**	CAP/MR Comprehensive- Tier 2	CAP MR/DD Comprehensive Waiver (Tier 2)	1915C	L	MR	10/24/08	11/1/08	6/30/11	Jan-09	Ongoing
4141.90.R3	NC - Community Alternatives Program for Children	CAP Children	1915C	N	CC	7/1/95	7/1/05	6/30/14	Jan-05	Ongoing
NC02.000**	NC - Managed Behavioral Health Care Waiver	Piedmont Innovations	1915BC	4	P1	4/1/04	4/1/08	6/30/13	Apr-05	Dec-08
NC02.000**	NC - Managed Behavioral Health Care Waiver	Piedmont Innovations	1915BC	4	P2	4/1/04	4/1/08	6/30/13	Jan-09	Ongoing

NP = Not Provided

\*Represents waivers that were active in 2008, but were not active in 2009.

\*\*Represents waivers that were ongoing from 2008 to 2009, but were reported to a different ID in MAX 2009 than in MAX 2008.

## NORTH DAKOTA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	NP	Experience Health Disease Management Program	1915B	2	WW	1/1/07	10/1/07	9/30/11	Apr-08	Ongoing
0273.90.R1	ND	HCBC - Traumatic Brain Injury Waiver	1915C	G	93	4/1/94	4/1/07	9/30/13	Apr-07	Ongoing
0337.90.R4	ND - Mental Retardation / Developmental Disabilities	HCBC Waiver	1915C	L	90	4/1/94	4/1/09	6/30/15	Jan-05	Ongoing
0421.R01.00	ND DD Self-Directed Supports	Self Directed Support for Adults	1915C	L	SS	1/17/06	4/1/06	3/31/09	Dec-06	Mar-09
0422	NP	Self Directed Support for Families	1915C	L	RR	1/17/06	4/1/09	3/31/14	Jul-06	Ongoing
0468.R00.00	ND Technology Dependent Medicaid Waiver	Technology Dependent Medicaid Waiver	1915C	N	94	8/1/07	NP	7/31/15	Jul-07	Ongoing
0568.R00.00	ND Medicaid Waiver for Medically Fragile Children	Children with Medically Fragile Needs	1915C	N	96	4/1/08	6/1/08	5/31/16	Jul-08	Ongoing

NP = Not Provided

## OHIO'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0198.R04.00	OH - PASSPORT	Passport Waiver III	1915C	G	A	7/1/93	7/1/08	6/30/12	Jan-05	Ongoing
0198.R04.00	OH - PASSPORT	Passport Waiver and MFP	1915C	G	HA	7/1/93	7/1/08	6/30/12	Jan-09	Ongoing
40196	NP	Choices Waiver	1915C	G	9	11/1/01	7/1/09	5/31/12	Jan-05	Ongoing
40196	NP	Choices Waiver and MFP	1915C	G	H9	11/1/01	9/15/09	6/30/14	Oct-09	Ongoing
0440.R00.01	OH Transitions II Aging Carve Out	Transitions II Aging Carve Out Waiver	1915C	G	A4	1/1/06	7/1/09	6/30/12	Oct-05	Ongoing
0440.R00.01	OH Transitions II Aging Carve Out	Transitions II Aging Carve Out Waiver and MFP	1915C	G	H4	NP	7/1/09	6/30/14	Jan-09	Ongoing
0446	Ohio Assisted Living Waiver	Assisted Living Waiver	1915C	G	P3	NP	7/1/09	7/31/12	Jul-06	Ongoing
0337.90.R1.02	Ohio Home Care Waiver	OHIO HOME CARE Waiver	1915C	I	A1	7/1/99	7/1/06	7/31/12	Oct-05	Ongoing
0337.90.R1.02	Ohio Home Care Waiver	OHIO HOME CARE Waiver and MFP	1915C	I	H1	7/1/99	7/1/06	6/30/11	Jan-09	Ongoing
0380	NP	Level 1 Waiver Mental Retardation / Developmental Disabilities	1915C	L	0	12/1/02	7/1/06	3/31/14	Jan-05	Ongoing
0380	NP	Level 1 Waiver Mental Retardation / Developmental Disabilities and MFP	1915C	L	H0	12/1/02	7/1/06	3/31/14	Dec-09	Ongoing
0231.90.R1	OH - Individual Options Waiver	Individual Options - Waiver VI	1915C	L	B	7/1/91	3/1/09	3/31/12	Jan-05	Ongoing
0231.90.R1	OH - Individual Options Waiver	Individual Options Waiver and MFP	1915C	L	HB	7/1/91	3/1/09	3/31/12	Jun-08	Ongoing
0383	NP	Intermediate Care Facility-Mentally Retarded - Cost Level 1	1915C	L	P	1/1/02	7/1/2010	10/31/12	Jan-05	Ongoing
0383	NP	Intermediate Care Facility-Mentally Retarded - Cost Level 2	1915C	L	Q	1/1/02	7/1/2010	10/31/12	Jan-05	Ongoing
0383	NP	Intermediate Care Facility-Mentally Retarded - Cost Level 3	1915C	L	R	1/1/02	7/1/2010	10/31/12	Jan-05	Ongoing
0383	NP	Intermediate Care Facility-Mentally Retarded - Cost Level 4	1915C	L	S	1/1/02	7/1/2010	10/31/12	Jan-05	Ongoing
0383	NP	Intermediate Care Facility-Mentally Retarded - Cost Level 5	1915C	L	T	1/1/02	7/1/2010	10/31/12	Jan-05	Ongoing

NP = Not Provided



## OKLAHOMA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00048/6-09	Oklahoma SoonerCare	Oklahoma Employer/Employee Partnership for Insurance Coverage (O-EPIC) Program	HIFA	5	WF	9/30/05	NP	12/31/12	Jan-06	Ongoing
11-W-00177/6	Oklahoma SoonerCare Family Planning	Oklahoma SoonerPlan Family Planning	1115	F	WH	11/5/04	NP	8/30/11	Jan-05	Ongoing
11W00048/6-09	Oklahoma SoonerCare	SoonerCare Waiver	1115	1	WF	10/12/95	4/1/96	12/31/12	Jan-05	Ongoing
0256.R1.05	Oklahoma's Advantage Waiver	Advantage Program Waiver	1915C	G	WA	7/1/93	7/1/07	12/31/12	Jan-05	Ongoing
0179.90.R2.05	OK - Community	Home and Community Based Waiver	1915C	L	WB	7/1/91	7/1/06	12/31/12	Jan-05	Ongoing
0399.R01.01	OK - Homeward Bound	Homeward Bound Waiver	1915C	L	WE	7/1/03	7/1/06	7/31/13	Jan-05	Ongoing
0343.90.05	OK - In-Home Supports for Adults	In-Home Support - Adult Waiver	1915C	L	WC	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0351.R02.00	OK - In-Home Supports for Children	In-Home Support - Child Waiver	1915C	L	WD	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing

NP = Not Provided

## OREGON'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00142/0	Oregon Family Planning 1115	Oregon Family Planning Expansion Waiver	1115	F	AC	10/14/98	1/1/99	10/31/12	NR	NR
21-W-00013/10 11-W-00160/10	Oregon Health Plan 2	Oregon Health Plan Section 1115 Demonstration	1115	1	A7	10/15/02	NP	10/31/13	Jan-05	Ongoing
21-W-00013/10 11-W-00160/10	Oregon Health Plan 2	HIFA Demonstration	1115	5	A7	10/15/02	NP	10/31/10	NR	NR
11-W00130/0*	NP	Independent Choices Section 1115 Demonstration*	1115	1	A2	11/20/00	12/20/06	1/31/08	Jan-05	Jan-08
OR09.R07	Oregon Non Emergency Transportation 1915(b)	Transportation Brokerage Expansion Waiver	1915B	2	A8	9/1/94	NP	6/30/11	Jan-05	Ongoing
0185.90.R2.08	Seniors and People with Disabilities	Aged and Physically Disabled Home and Community Based Section 1915(c)	1915C	G	A6	10/1/91	10/1/06	9/30/13	Jan-05	Ongoing
0565.R00.00	OR Medically Involved Children's Waiver	NP	1915C	I	AF	2/29/08	3/1/08	2/28/16	Oct-08	Ongoing
0117.90.R3	OR - Waiver for Individuals with Developmental Disabilities	Intermediate Care Facility / Mentally Retarded (ICF/MR) Comprehensive Residential Home and Community Based Section 1915(c)	1915C	L	A1	7/1/93	7/1/08	6/30/14	Jan-05	Ongoing
40194.90	Children with Behavioral Health Needs	ICF/MR Behavioral Home and Community Based Section 1915(c) Model	1915C	L	A4	4/1/01	4/1/09	6/30/14	Jan-05	Ongoing
375.90	Support Services Waiver for Adults	ICF/MR Support Services Home and Community Based Section 1915(c)	1915C	L	A5	7/1/01	7/1/09	9/30/13	Jan-05	Ongoing
40193.90	Children with Hospital Level of Care	Hospital Medically Fragile Services Home and Community Based Section 1915(c) Model	1915C	N	A3	4/1/01	NP	7/31/14	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

\*Represents waivers that were active in 2008, but were not active in 2009.

## PENNSYLVANIA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	PA Family Planning Waiver 1115	Family Planning (Select Plan for Women)	1115	F	FP	5/11/07	6/1/07	6/1/12	Oct-07	Ongoing
NP	Pennsylvania Access Plus 1915(b)	Access Plus	1915B	2	AP	12/3/04	1/1/11	12/31/12	Mar-05	Ongoing
NP	Pennsylvania Health Choices 1915(b)	HealthChoices	1915B	2	HC	7/31/02	1/1/11	12/13/12	Jan-05	Ongoing
0279.90.R1	HCBS Waiver for Individuals Age 60 and Over	Pennsylvania Department of Aging (PDA)	1915C	G	38	7/1/95	7/1/08	7/31/12	Jan-05	Ongoing
0313.90.R1	PA - Elwyn Waiver	Elwyn	1915C	I	33	10/1/96	9/30/09	12/31/09	Jan-05	Ongoing
0277.R03.00	PA Attendant Care	Attendant Care	1915C	I	40	7/1/95	7/1/08	6/30/12	Jan-05	Ongoing
0319.90.02	PA - Office of Social Programs Independence Waiver	Office of Social Programs/Independence	1915C	I	42	7/1/97	7/1/06	6/30/15	Jan-05	Ongoing
0386.90	PA - COMMCARE Waiver Program	CommCare	1915C	J	59	4/1/02	7/1/10	6/30/11	Jan-05	Ongoing
0354.R02.01	PA - Person/Family Directed Support Waiver	Person/Family Directed Support	1915C	L	68	7/1/99	7/1/07	6/30/13	Jan-05	Ongoing
0324.90	PA - Infant, Toddler, Family Waiver	Infant, Toddler, and Family	1915C	L	70	7/1/98	7/1/06	12/31/14	Jan-05	Ongoing
0147.R04.01	PA Consolidated Waiver	Office of Mental Retardation/Consolidated	1915C	L	77	7/1/90	7/1/07	6/30/15	Jan-05	Ongoing
0235.90.R1.02	Office of Social Programs OBRA Waiver	Office of Social Programs/OBRA	1915C	L	79	10/1/91	7/1/06	12/31/14	Jan-05	Ongoing
0593.R00.01	PA Autism	Autism Waiver	1915C	P	52	7/1/08	7/1/08	6/30/15	Jan-09	Ongoing
4144.90.R3	PA - Michael Dallas HCBS for Persons Dependent Upon a Medical Device	Michael Dallas	1915C	N	78	7/1/90	NP	9/28/10	Jan-05	Ongoing
0192.90.R2	AIDS/HIVD	HIV/AIDS	1915BC	4	80	4/1/95	1/1/10	12/31/14	Jan-05	Ongoing

NP = Not Provided

## RHODE ISLAND'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-000041	Rhode Island RItCare 1115	RiteCare	1115	I	RC	11/1/93	8/1/94	12/31/13	Jan-05	Ongoing
11-W-000041	Rhode Island RItCare 1115	Family Planning	1115	F	RC	11/1/93	8/1/94	12/31/13	Jan-05	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Dental Manged Care Plan	1115	I	DC	NP	NP	12/31/13	Jan-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	HCBS Aged & Disabled	1115	I	I	4/1/85	4/1/08	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	DEA Community Services	1115	I	2	4/1/94	NP	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Mentally Retarded Comm Svcs	1115	I	3	1/1/06	1/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	HCBS Assisted Living	1115	I	7	1/1/99	1/1/07	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Self-Direction Community Svcs	1115	I	4	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Core Community Services	1115	I	9	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Habilitation Community Service	1115	I	10	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Habilitation Group Home Svcs	1115	I	11	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Preventive Community Services	1115	I	12	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	DEA Assisted Living	1115	I	13	7/1/88	7/1/06	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Hospital/SNF Respite Waiver	1115	I	17	4/26/07	5/1/07	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	Psych Hospital Respite Waiver	1115	I	18	4/26/07	5/1/07	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	CNOM	1115	I	19	7/1/2009	7/1/2009	12/31/13	Jul-09	Ongoing
NP	Rhode Island Global Consumer Choice Compact	ICF/MR Respite Waiver	1115	I	16	4/26/07	5/1/07	12/31/13	Jul-09	Ongoing
NP	NP	Dental Manged Care Plan	1915B	2	DC	NP	NP	12/31/08	Jan-08	Dec-08
0040.90.R5	RI HCBS for the Aged and Disabled	HCBS Aged & Disabled	1915C	G	W1	4/1/85	4/1/08	6/30/09	Jan-05	Jun-09
0379.90	RH - Disabled Individuals	HCBS Habitation	1915C	G	W4	12/1/01	NP	6/30/09	Jan-08	Jun-09
40126.90.R3	RH - People Actively Reaching Independence Waiver	HCBS Severely Disabled	1915C	G	W4	4/1/94	NP	6/30/09	Jan-08	Jun-09
0441.IP	RI Personal Choice	Personal Choice	1915C	G	W4	1/1/06	1/1/06	6/30/09	Jan-08	Jun-09
0335.90.R1	RI HCBS for Elders and Adults w/Disabilities in Assisted Living	HCBS Assisted Living	1915C	G	W7	1/1/99	1/1/07	6/30/09	Jan-05	Jun-09
0176.90.R3	RI HCBS for the Elderly	HCBS DEA	1915C	H	W2	7/1/88	7/1/06	6/30/09	Jan-05	Jun-09

NP = Not Provided

## RHODE ISLAND'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0462	RI HCBS for Respite for Disabled Children	Hospital or Skilled Nursing Facility level of care	1915C	I	17	4/26/07	5/1/07	6/30/09	Aug-07	Jun-09
0162.90.R3	RI	HCBS Mentally Retarded / Developmental Disabilities	1915C	L	W3	7/1/91	7/1/06	6/30/09	Jan-05	Jun-09
0463	RI HCBS for Respite for MR/DD Children	ICF/MR (Institutional Care Facility/Mentally Retarded)	1915C	L	16	4/26/07	5/1/07	6/30/09	Aug-07	Jun-09
0466	RI HCBS for Respite for Children w/Mental Illness	Psychiatric Hospital level of care	1915C	M	18	4/26/07	5/1/07	6/30/09	Aug-07	Jun-09

NP = Not Provided

## SOUTH CAROLINA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00007/4	South Carolina Family Planning Demonstration	Family Planning	1115	F	WF	12/17/93	7/1/94	12/31/10	Jan-05	Ongoing
0405-IP.02	SC - Choice	South Carolina CHOICE	1915C	G	WS	7/1/03	7/1/07	6/30/16	Jul-06	Ongoing
0284.R03.00	SC Head and Spinal Cord Injury	Individuals with Head and Spinal Cord Injuries	1915C	J	WH	7/1/95	7/1/08	6/30/13	Jan-05	Ongoing
0186.90.R2	SC - HIV/AIDS Waiver	HIV AIDS	1915C	K	WA	10/1/91	10/1/06	6/30/16	Jan-05	Ongoing
0237.90.R2	SC - Mental Retardation/Related Disabilities	Mental Retardation and Related Disabilities	1915C	L	WM	10/1/94	10/1/09	12/31/14	Jan-05	Ongoing
0676.R00.00	SC Community Supports	Community Supports Waiver	1915C	L	WC	6/9/09	7/1/09	6/30/12	Jul-09	Ongoing
40181.90.R1	SC - Vent Waiver	Ventilator Dependent	1915C	N	WV	12/1/94	12/1/07	11/30/12	Jan-05	Ongoing
0675.R00.00	SC Medically Complex Children	Medically Complex Children's Waiver	1915C	N	WX	12/11/08	1/1/09	12/31/11	Apr-09	Ongoing
0456	South Carolina's Home and Community Based Waiver for Children with Pervasive Developmental Disorder	Pervasive Developmental Disorder Waiver	1915C	P	WD	12/27/06	1/1/09	12/31/14	Jan-08	Ongoing

## SOUTH DAKOTA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
0189.90.R2	SD - Elderly	Elderly	1915C	G	01	10/1/91	10/1/06	5/31/12	Jan-05	Ongoing
0264.R01.02	SD - Assistive Daily Living Services	Assistive Daily Living Services	1915C	I	04	6/1/94	6/1/07	5/31/12	Jan-05	Ongoing
0044.R01.00	SD CHOICES	Developmentally Disabled	1915C	L	02	6/1/80	6/1/08	3/31/12	Jan-05	Ongoing
0338.90	SD - Family Support Waiver	Family Support	1915C	L	03	10/1/98	6/1/07	12/31/13	Jan-05	Ongoing

## TENNESSEE'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00151/4	Tennessee TennCare 1115	TENNCARE II All TennCare eligibles	1115	I	01	5/30/02	12/15/09	6/30/13	Jan-05	Ongoing
0381.R01.01	TN HCBS Elderly and Disabled	HCBWAGD Commission on Aging Waiver	1915C	G	07	5/1/02	7/1/08	9/30/11	Jan-05	Ongoing
0128.90.R1.05	NP	HCBWMRDD Mental Retardation / Developmental Disabilities Adult Waiver	1915C	L	04	9/22/87	1/1/10	12/31/13	Jan-05	Ongoing
0357.90	TN - HCBS Mental Retardation (Arlington)	HCBWMRDD Mental Retardation / Developmental Disabilities Arlington Waiver	1915C	L	06	7/1/00	NP	12/31/13	Jan-05	Ongoing
0427.R01.00	TN - Self Determination Waiver	HCBWMRDD Self Determination Waiver	1915C	L	09	1/5/05	1/1/08	6/30/12	Jul-05	Ongoing

NP = Not Provided



## TEXAS'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
I 1-W-0023316	Texas Family Planning 1115 Waiver	NP	1115	F	H1	12/21/06	1/1/07	12/31/11	Jan-09	Ongoing
NP	Texas Access Reform STAR MMC Consolidated 1915(b)	Texas STAR	1915B	2	F1	8/10/01	7/1/08	6/30/12	Jan-05	Ongoing
NP	Texas NorthStar Behavioral Health	NorthSTAR (Behavioral Managed Care - Dallas, TX)	1915B	2	F2	9/7/99	10/1/09	9/30/11	Jan-05	Ongoing
NP	Texas Disease Management	NP	1915B	2	H2	8/9/05	8/1/09	7/31/11	NR	NR
TX-19	Texas - Integrated Care Model	ICM	1915B	2	H3	8/10/07	NP	7/31/09	NR	NR
0325.90	Texas Star+Plus	STAR+PLUS (Aged & Disabled Managed Care - Houston, TX)	1915B	2	E9	1/30/98	2/1/98	6/30/13	Jan-09	Ongoing
0266.R03.01	TX Community Based Alternatives	Community Based Alternatives (CBA)	1915C	G	D3	3/1/94	9/1/07	6/30/13	Jan-05	Ongoing
0373 & 0374	NP	Consolidated Waiver Program (CWP)	1915C	G	E7	9/1/04	10/1/09	9/23/14	Jan-05	Ongoing
0461	TX Integrated Care Management (ICM) Program	ICM (serves the SSI population)	1915C	G	No ID	7/1/07	2/1/08	6/30/13	NR	NR
0281.90.R1	TX Deaf Blind w/ Multiple Disabilities	Deaf Blind with Multiple Disabilities (DBMD)	1915C	I	E6	3/1/95	3/1/08	6/30/13	Jan-05	Ongoing
0221.90.R2	TX - Community Living Assistance and Support Services(CLASS) Program	Community Living Assistance and Support Services (CLASS)	1915C	L	D2	9/1/94	9/1/09	8/31/14	Jan-05	Ongoing
0403	TX - Home & Community-Based Services	Texas Home Living (TxHmL)	1915C	L	E5	9/1/93	3/1/07	6/30/13	Jan-05	Ongoing
0110	Home and Community-based Services (HCS)	Home and Community-based Services (HCS)	1915C	L	E2	7/1/88	9/1/07	8/31/13	Jan-05	Ongoing
0657.R00.00	TX Youth Empowerment Services (YES)	Youth Empowerment Services (YES)	1915C	M	F3	2/19/09	9/1/09	3/31/13	NR	NR
0181.R04.01	Medically Dependent Children Program (MDCP)	Medically Dependent Children Program (MDCP)	1915C	N	E8	7/1/98	9/1/09	6/30/13	Jan-05	Ongoing
0478	TX Integrated Care Management Program	ICM (serves the MAO population)	1915C	O	No ID	7/1/07	2/1/08	12/31/11	NR	NR
0325.90*	Texas Star+Plus	STAR+PLUS (Aged & Disabled Managed Care - Houston, TX)	1915BC	4	E9	1/30/98	2/1/98	6/30/13	Jan-05	Dec-08

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\*Represents waivers that were active in 2008, but were not active in 2009.

## UTAH'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00145/8	Utah Primary Care Network (PCN) 1115	PCN	1115	1	06	2/8/02	7/1/02	6/30/13	Jan-05	Ongoing
UT01.R08	Utah Choice of Health Care Delivery Program 1915(b)	Freedom of Choice (Physical Health)	1915B	2	08	3/23/82	1/1/10	12/31/16	Jan-05	Ongoing
UT02.05	Utah - Prepaid Mental Health Plan	Prepaid Mental Health	1915B	2	09	12/20/01	12/27/01	12/31/13	Jan-05	Ongoing
UT03.R01	Utah Non-Emergency Transportation Waiver 1915(b)	Non-Emergency Transportation	1915B	2	10	9/19/00	7/1/09	6/30/13	Jan-05	Ongoing
0439.R01.00	UT New Choices	New Choices	1915C	G	11	4/1/07	7/1/10	6/30/15	May-07	Ongoing
0247.90.R2	UT - Individuals Aged 65 and Older	Aged - Individuals 65 and Over	1915C	H	05	7/1/92	NP	6/30/15	Jan-05	Ongoing
0331.90	UT - Physical Disabilities	Physical Disabilities	1915C	I	03	7/1/98	7/1/06	6/30/16	Jan-05	Ongoing
0292.90.R1	UT - Acquired Brain Injury	Traumatic Brain Injury	1915C	J	04	7/1/96	7/1/09	6/30/15	Jan-05	Ongoing
0158.90.R3	UT - Developmentally Disabled / Mentally Retarded	Developmentally Disabled / Mentally Retarded	1915C	L	01	7/1/90	NP	7/31/15	Jan-05	Ongoing
40183.R02.00	UT Waiver for Technology Dependant, Medically Fragile Individuals	Technology Dependent HCBS Waiver	1915C	N	02	1/1/95	7/1/08	6/30/13	Jan-05	Ongoing

NP = Not Provided

## VERMONT'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11-W-00191/1	VT Long-Term Care Plan	ERC	1115	1	L1	6/13/05	10/1/05	9/30/10	Oct-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	HCBS Aged and Disabled	1115	1	L2	6/13/05	10/1/05	9/30/10	Oct-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	Skilled Nursing Facility	1115	1	L3	6/13/05	10/1/05	9/30/10	Sep-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	PACE	1115	1	L4	6/13/05	10/1/05	9/30/10	Apr-07	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	Developmental Services	1115	1	G1	9/27/05	10/1/05	9/30/10	Oct-06	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	Traumatic Brain Injury	1115	1	G2	9/27/05	10/1/05	9/30/10	Oct-06	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	Childrens Mental Health	1115	1	G3	9/27/05	10/1/05	9/30/10	Oct-06	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	PC Plus	1115	1	G4	9/27/05	10/1/05	9/30/10	Jan-05	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	Community Rehabilitation and Treatment	1115	1	G5	9/27/05	10/1/05	9/30/10	Oct-06	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	VHAP Rx	1115	6	G6	9/27/05	10/1/05	9/30/10	Jan-05	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	Underinsured Children <300% FPL and Unisured Adults <150% FPL	1115	1	G7	9/27/05	10/1/05	9/30/10	Jan-06	Ongoing

## VIRGINIA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
1-W-00152/3	Virginia Family Planning 1115	Family Planning	1115	F	F1	7/22/02	6/29/10	6/30/13	Jan-05	Ongoing
VA.03.R04	Virginia Managed Care Waiver 1915(b)	Medallion - PCCM	1915B	2	M1	12/23/91	7/1/11	6/30/13	Jan-05	Ongoing
VA.03.R04	Virginia Managed Care Waiver 1915(b)	Medallion - MCO	1915B	2	M2	12/23/91	7/1/11	6/30/13	Jan-05	Ongoing
VA.0321.R02.01	VA Elderly or Disabled with Consumer Direction	EDCD Waiver	1915C	G	A3	7/1/97	7/1/07	6/30/12	Jan-05	Ongoing
40206.R01.00	VA Alzheimer's Assisted Living	Alzheimer's Assisted Living Waiver	1915C	H	Z3	7/1/05	7/1/05	9/30/13	Aug-06	Ongoing
4160.R03.01	VA HIV/AIDS	HIV/AIDS	1915C	K	H3	7/1/94	7/1/07	12/31/12	Jan-05	Ongoing
0358.R02.00	VA Individual & Family DD Support	Developmental Disorders	1915C	L	D3	7/1/00	7/1/08	6/30/13	Jan-05	Ongoing
0372.90	VA - Mental Retardation	Mental Retardation and Developmental Disabilities	1915C	L	R3	9/15/01	7/1/09	3/31/12	Jan-05	Ongoing
0430.R01.00	VA Day Support HCBW for Persons w/ Mental Retardation	Day Support Waiver for Mental Retardation Individuals	1915C	L	S3	7/1/05	7/1/08	6/30/13	Jul-05	Ongoing
4149.R02.00	VA Technology Assisted	Technology Assisted Waiver	1915C	N	T3	12/1/91	7/1/08	3/31/14	Jan-05	Ongoing

## WASHINGTON'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
11W00134/0-01	Washington Family Planning 1115	Take Charge Family Planning	1115	F	TC	3/6/01	7/1/01	12/31/13	Jan-05	Ongoing
0WA08.R03.01	Washington Mental Health	Integrated Community Mental Health Program	1915B	2	MH	3/1/02	4/1/08	10/30/12	Jan-05	Ongoing
0049.91.R4	WA - Community Options Program Entry System	Community Options Program Entry System (COPES)	1915C	G	CO	4/1/94	4/1/09	3/31/14	NR	NR
0419.R01.01	WA Medically Needy In Home	Medically Needy In-Home Waiver	1915C	G	IH	5/1/04	5/1/07	4/30/15	NR	NR
0390.90	WA - Medically Needy Residential Waiver	ABD (Community Setting) Waiver	1915C	G	CS	5/1/02	NP	4/30/15	NR	NR
0443	NP	New Freedom Waiver	1915C	G	NF	2/15/07	2/15/07	2/14/15	NR	NR
0408	WA - Basic Waiver	Basic Waiver	1915C	L	BW	1/1/04	4/1/07	3/31/12	NR	NR
0409	WA - Basic Plus Waiver	Basic Plus Waiver	1915C	L	BP	4/1/04	4/1/07	3/31/12	NR	NR
0410	WA - Core Waiver	Core Waiver	1915C	L	CW	4/1/04	4/1/07	3/31/12	NR	NR
0411	WA - Public Safety Waiver	Public Safety Waiver	1915C	L	PS	4/1/04	4/1/07	9/28/12	NR	NR
40669.R00.00	WA Children's Intensive In-Home Behavioral Support	Children's Intensive In-Home Behavior Support Waiver	1915C	L	CI	4/21/09	5/1/09	4/30/12	NR	NR

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## WEST VIRGINIA'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	West Virginia Mountain Health Trust 1915(b)	Mountain Health Trust - HMO Program	1915B	2	MH	4/29/96	6/30/10	6/30/12	Jan-05	Ongoing
0134.90.R2	NP	Waiver Program for the Aged and Disabled	1915C	G	AD	NP	7/1/10	4/30/14	Jan-05	Ongoing
0133.90.R2	NP	Mental Retardation / Developmental Disabilities Waiver	1915C	L	DD	NP	7/1/10	9/30/12	Jan-05	Ongoing

NP = Not Provided

## WISCONSIN'S 2009 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00149	NP	SeniorCare	1115	6	C1	7/1/02	NP	12/31/09	Jan-05	Ongoing
11W00144	Wisconsin Family Planning 1115	Family Planning Waiver	1115	F	D1	6/14/02	1/1/03	12/31/10	Jan-05	Ongoing
11W00125 and 21W00001	Wisconsin Badger Care 1115	BadgerCare	1115	1	A1	1/22/99	5/30/07	9/30/10	Jan-05	Ongoing
11W00125 and 21W00001*	Wisconsin Badger Care 1115	BadgerCare	1115	1	B1	1/22/99	5/30/07	2/1/08	Jan-05	Feb-08
11W00123*	NP	Wisconsin Partnership Program - Partnership	1115	1	E1	NP	NP	12/31/07	Jan-05	Sep-08
11W00242/5	Wisconsin BadgerCare Plus - Health Insurance for Childless Adults	Childless Adults	1115	1	V1	12/31/08	1/1/2009	12/31/13	Jul-09	Ongoing
0154.90.R3	WI - Wisconsin Community Options Program (COP)	Wisconsin HCBS Waiver: Aged and Disabled	1915C	G	F1	1/1/95	NP	2/28/11	Apr-08	Ongoing
0367.90	WI - Family Care-Aged/PD	Wisconsin HCBS Waiver: Aged and Disabled	1915C	G	K1	1/1/02	NP	3/31/12	NR	NR
0485.R00.00	WI SDS - Elderly and Physically Disabled	NP	1915C	G	U1	1/1/08	1/1/08	12/31/10	Jan-09	Ongoing
0413	WI - Children's Physical Disability Waiver	Children Long-Term Supports (CLTS) - Kids Physical Disabilities	1915C	I	O1	11/20/03	11/1/06	3/31/12	Apr-08	Ongoing
0275	WI - Services to Persons with Brain Injuries in WI	Wisconsin HCBS Waiver: Traumatic Brain Injury	1915C	J	H1	1/1/95	1/1/09	3/31/12	Apr-08	Ongoing
0229	NP	Wisconsin HCBS Waiver: Developmental Disabilities	1915C	L	G1	1/1/94	NP	9/30/11	Apr-08	Ongoing
0368.90	WI - Family Care-Mental Retardation / Developmental Disabilities	Wisconsin HCBS Waiver: Mental Retardation / Developmental Disabilities	1915C	L	L1	1/1/02	NP	4/30/12	NR	NR
0414	WI - Children's Developmental Disability Waiver	CLTS - Kids Developmental Disabilities	1915C	L	P1	11/20/03	1/1/08	3/31/12	Apr-08	Ongoing
0484.R00.00	WI Self Directed Support Waiver - DD	NP	1915C	L	T1	1/1/08	1/1/08	12/31/10	Jan-09	Ongoing
0415	WI - Children's Mental Health Waiver	CLTS - Kids Mental Health	1915C	M	R1	11/20/03	11/1/06	3/31/12	Apr-08	Ongoing
0433.01	WI Community Opportunities and Recovery	COR	1915C	M	S1	5/30/07	1/1/08	4/30/10	Jul-08	Ongoing
W107	Wisconsin Family Care Concurrent b/c Waiver	Family Care - Counties outside Milwaukee	1915BC	4	M1	6/1/01	1/1/08	12/31/09	NR	NR
W108	Wisconsin Family Care Concurrent b/c Waiver	Family Care - Milwaukee	1915BC	4	N1	6/1/01	1/1/02	1/1/08	NR	NR

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## WYOMING'S 2009 MEDICAID WAIVERS

<b>Waiver Number (CMS or State)</b>	<b>Waiver Name (CMS)</b>	<b>Waiver Name (State)</b>	<b>CMS Waiver Type</b>	<b>MAX Waiver Type</b>	<b>MAX Waiver ID</b>	<b>Original CMS Approval Date</b>	<b>Most Recent Renewal Date (CMS)</b>	<b>Expiration/ Renewal Date (CMS)</b>	<b>MAX Reporting Start Date</b>	<b>MAX Reporting End Date</b>
NP	WY Family Planning 1115 Demonstration	NP	1115	F	F1	10/1/08	7/1/09	9/30/13	Jan-09	Ongoing
0236.90.R2	WY - Long-Term Care/HCBS Waiver	HCBS For the Elderly and Disabled	1915C	G	W2	7/1/93	NP	4/30/14	Jan-05	Ongoing
0369.90	WY - Assisted Living Facility Waiver	HCBS for Assisted Living Facility Individuals	1915C	G	W4	7/1/01	7/1/09	6/30/14	Jan-05	Ongoing
0370.90	WY - Acquired Brain Injury-HCBS for Adults	HCBS for Acquired Brain Injury Individuals	1915C	J	W5	7/1/01	7/1/09	6/30/14	Jan-05	Ongoing
0226.90.R2	WY - Adult Developmentally Disabled Home and Community Based Waiver	HCBS For Developmentally Disabled Adults 21 Years of Age and Older	1915C	L	W1	7/1/94	7/1/09	6/30/14	Jan-05	Ongoing
0253.90.R2	WY - Developmentally Disabled Children	HCBS for Developmentally Disabled Children Birth Thru 20 Years of Age	1915C	L	W3	7/1/92	NP	6/30/15	Jan-05	Ongoing
0451	NP	Children's Mental Health	1915C	M	W6	7/1/06	7/1/09	6/30/14	Jan-07	Ongoing

NP = Not Provided



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