Model Legislation

Health and Human Services

Medicaid Consumer-Directed Care Act

Summary

The purpose of this Act is to allow consumers to be in charge of directing their own care. In the existing system, disabled Medicaid beneficiaries have very little control over the long term care services they receive. This legislation is designed to provide consumers more independence, flexibility, and choice in determining and arranging their care. It challenges the notion that all Medicaid recipients are incapable of managing their own care effectively and responsibly. The Medicaid Consumer Directed Care Act is designed to provide control to eligible persons so that they might purchase the kind of services that are best for them.

Model Legislation

Section 1. The Act may be cited as the Medicaid Consumer Directed Care Act

Section 2. Definitions

(A) Eligible Medicaid beneficiaries means the following:

(1) Frail elders - (ages 60 +) who are receiving 1915c Medicaid Waiver Services

(2) Adults with physical disabilities - (ages 18-64) who are receiving Medicaid Home and Community Based Services Waiver Services

(3) Children (ages 3-17) with developmental disabilities who are receiving Medicaid Home and Community Based Services Waiver Services

(4) Adults (ages 18-64) with developmental disabilities who are receiving Medicaid Home and Community Based Services Waiver Services

(B) Eligible services means care received in the home or the community by eligible Medicaid beneficiaries that meet the long term care needs that would otherwise make them at risk for institutional placement.

Section 3. The Department of Health and Human Services shall establish within Medicaid this program to allow eligible Medicaid beneficiaries, as defined above, to receive a cash allowance or control of a specific budget so that they might purchase the long term care services of their choosing.

The Department of Health and Human Services will provide a case manager-consultant to assist the participant. The Department of Health and Human Services will assess the participant’s needs and establish the budget.

Section 4. Severability Clause.

Section 5. Repealer Clause.

Section 6. Effective Date.

Adopted by the HHS Task Force and approved by the ALEC Board of Directors in 2002.