

INSTRUCTIONS

SELF-DIRECTED CARE DEMONSTRATION

The State will complete the **shaded** areas of these forms with the requested historical data and assumptions to assist in the development of the budget estimates for this waiver amendment. The sheets are designed to develop trend analyses and determine budget estimates for with and without waiver costs. The forms should be completed in the order presented in the instructions below. If the demonstration will be less than statewide then fill-in the "SHELL" twice - once with statewide data and once for the geographic area of the demonstration (the with waiver portion should be identical in each submission - the statewide data is valued for its robustness in trend analysis, but the geographic/demonstration specific information is essential for assessing the level of per person cost.)

Historic Data (upper left hand quadrant of "SHELL")

Column A, Line 5 - Specify the time period for each year expenditures are reported (e.g., state fiscal year, federal fiscal year, calendar year, etc.)

Column E, Line 3 - Specify the base year. This should relate to the expenditures reported in column F.

Column B-F, Lines 8-14 - For each year enter the total expenditure for personal care service users. Enter expenditures for all listed services included in your State Plan, including Home and Community Based Services (HCBS) if the HCBS enrollees will be eligible for participation in the Self-Directed Care Demonstration. All services to be self directed must be included. Also include non-self-directed services that will either be reduced or increased by self directing services (impacted services) - it will be beneficial to include services that may be reduced, but budget neutrality requires the inclusion of services that could be increased through either substitution or complementary impacts. Use the "OTHER" row to include additional impacted or self-directed services and modify the row titles in column A, Lines 8 through 14 to reflect the State's service definitions. Add additional rows as needed and modify the total calculation to include additional entries.

Column B-F, Line 17 – For each year enter the total number of member months (unduplicated eligible months) for the population of Personal Care Service users (or user of any service that under the demonstration will become self-directed.)

With and Without Waiver Projections (upper and lower quadrants of the right hand side of "SHELL")

Column I, Line 17 – Enter the number of months that have expired from the end of the base year to the end of the first demonstration year. As an example, the base year begins January 1, 2000 and ends December 31, 2000 and the demonstration year begins July 1, 2001 and ends June 30, 2002. The months of aging would be 18 months.

Column D, Line 33 - Enter the whole number that pertains to the estimated participation rate of consumers cashing out. The percentages will be calculated for you in Column E.

Column D, Line 37 - Enter the whole number that pertains to the estimated cost reduction rate per consumer cashing out. The percentages will be calculated for you in Column E.

NOTE: The Simple Sample is only an example of how the end product should appear. The sample is not based upon the completion of the historic worksheets.

TEMPLATE FOR SECTION 1115 COST INFORMATION
SHELL

States would enter information in the shaded cells. The rest of the sheet will be calculated.															
HISTORIC DATA: BASE YEAR (by) AND 4 PRIOR YEARS							DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION								
SPECIFY TIME PERIOD:	Base Year:						TREND	MONTHS	DEMONSTRATION YEARS (DY)						TOTAL
12/01/1998 to 09/30/2003	1999	2000	2001	2002	2003	5-YEARS	RATE	OF AGING	DY 01	DY 02	DY 03	DY 04	DY 05		WOW
TOTAL EXPENDITURES FOR PERSONAL CARE SERVICE CONSUMERS															
SERVICE CATEGORIES															
IC Treatment continuing Elderly	\$202,760.18	\$720,629.55	\$863,762.42	\$927,836.17	\$1,126,703.60	\$ 3,841,692									
IC Treatment continuing Young Adult	\$113,448.04	\$332,552.70	\$386,785.61	\$477,266.65	\$629,361.11	\$ 1,939,414									
IC Treatment new Elderly	\$115,228.27	\$715,248.33	\$843,684.24	\$1,009,427.90	\$1,326,461.05	\$ 4,010,050									
IC Treatment new Young Adult	\$91,221.26	\$501,862.83	\$588,454.04	\$781,841.09	\$1,074,675.93	\$ 3,038,055									
C/FA Management Fees	\$183,973.76	\$596,221.54	\$739,013.19	\$642,149.60	\$828,395.33	\$ 2,989,753									
Core Categories															
Durable Medical Equip	\$58,599.81	\$229,851.08	\$293,164.48	\$378,194.23	\$398,685.45	\$ 1,358,495									
Home Health Crossover	\$0.00	\$51.18	\$96.41	\$0.00	\$0.00	\$ 148									
Home Health Services	\$51,497.20	\$49,363.08	\$211,377.39	\$217,094.30	\$236,856.17	\$ 766,188									
Other Care Crossover	\$75,595.02	\$252,419.48	\$380,657.51	\$323,371.63	\$407.88	\$ 1,032,452									
ElderChoices Waiver	\$346,477.46	\$991,270.15	\$1,683,806.33	\$1,812,873.62	\$1,718,329.49	\$ 6,552,757									
TCM & CSMT age60 & older	\$16,592.12	\$69,304.11	\$71,755.50	\$63,942.00	\$61,104.50	\$ 282,698									
DDS Alternative Comm	\$31,670.33	\$111,014.96	\$173,734.38	\$211,844.19	\$182,394.72	\$ 710,659									
Hospice	\$20,975.76	\$0.00	\$39,602.67	\$20,786.52	\$21,143.39	\$ 102,508									
Nursing Home Hospice	\$9,102.00	\$0.00	\$791.29	\$11,615.81	\$4,448.39	\$ 25,957									
APD Attendant Care	\$48,504.00	\$164,152.00	\$257,644.00	\$269,240.00	\$225,174.17	\$ 964,714									
APD Environmental Adapt	\$4,500.00	\$4,500.00	\$5,481.50	\$25,968.89	\$0.00	\$ 40,450									
NEMT Non-Emergency Transport	\$6,759.20	\$24,175.09	\$67,306.47	\$38,909.18	\$44,480.52	\$ 181,630									
TOTAL	\$ 1,376,904	\$ 4,762,616	\$ 6,607,117	\$ 7,212,362	\$ 7,878,622	\$27,837,621			\$64,833,040	\$ 100,271,692	\$ 155,081,611	\$ 239,851,404	\$370,957,558	\$930,995,306	
PCS CONSUMER MEMBER MONTHS															
	2,072	6,194	7,830	8,174	10,919		51.51%	58	81,342	123,242	186,723	282,904	428,628		
TOTAL COST PER CONSUMER	\$ 664.53	\$ 768.91	\$ 843.82	\$ 882.35	\$ 721.55		2.08%	58	\$ 797	\$ 814	\$ 831	\$ 848	\$ 865		
TREND RATES															
	ANNUAL CHANGE					5-YEAR AVERAGE									
TOTAL EXPENDITURE		245.89%	38.73%	9.16%	9.24%	54.66%			BUDGET CEILING AT STATE'S HISTORY:					\$930,995,306	
PCS CONSUMER MEMBER MONTHS		198.94%	26.41%	4.39%	33.58%	51.51%									
TOTAL COST PER CONSUMER		15.71%	9.74%	4.57%	-18.22%	2.08%									
DEMONSTRATION WITH WAIVER (W/W) BUDGET PROJECTION															
PCS CONSUMER MEMBER MONTHS (MM)							TREND	MONTHS	DEMONSTRATION YEARS (DY)						TOTAL
							RATE	OF AGING	DY 01	DY 02	DY 03	DY 04	DY 05		W/W
							0.5151	58	77,275	117,079	177,387	268,759	407,197		
							0.5151	58	4,067	6,162	9,336	14,145	21,431		
CONSUMERS CASHING OUT MM															
PERCENT OF CONSUMERS CASHING OUT:			5	5%											
							0.0208	58	\$ 797	\$ 814	\$ 831	\$ 848	\$ 865	\$ 4,154	
							0.0208	58	\$ 765	\$ 781	\$ 797	\$ 814	\$ 831	\$ 3,988	
TOTAL COST PER CONSUMERS CASHING OUT															
PERCENT COST REDUCTION:			4	4%											
TOTAL W/W									\$64,703,374	\$ 100,071,149	\$ 154,771,448	\$ 239,371,701	\$370,215,643	\$929,133,315	
SAVINGS									\$ 129,666	\$ 200,543	\$ 310,163	\$ 479,703	\$ 741,915	\$ 1,861,991	