

**EXECUTIVE SUMMARY OF
A BI-PARTISAN CALL TO TRANSFORM THE
FEDERAL/STATE MEDICAID LONG-TERM CARE SYSTEM**

We, the undersigned, call for a fundamental restructuring of the long-term care system in the United States. Current federal/state Medicaid financed long-term care is institutionally biased, excessively complex, outdated, overly expensive, provider-driven, and unfair. We call for a shift from the present medically-oriented, institutional first funding to community first, whole health funding by Medicaid.

A NEW APPROACH... “COMMUNITY FIRST”

Self-Determination, including various forms of self-direction, mental health recovery approaches, and independent living philosophies have all grown separately from the grassroots through the efforts of individuals with disabilities, those in recovery, and those who are aging.

We call for the nation’s long-term care system to be fundamentally transformed to promote “Community First Whole Health” so that Medicaid beneficiaries are given:

- A choice of a healthy life in the community - not maintenance;
- A choice of community-based social services, such as job and housing assistance;
- Person-driven peer supports, brokering and self-determination budgeting that assure quality services and supports;
- Medicaid assistance in making their homes accessible, safe, and barrier-free;
- Use of Medicaid for affordable integrated housing in the community;
- Tools and funds for employment and income and asset development; and
- Tools for blending earnings, trusts, and long-term care insurance with public dollars.

Medicaid reform is both good public policy and fiscally sound.

We propose a 10-point transformation plan that will:

- **Invest \$100 million in up to ten states**, to enable those states to rebalance their long-term care systems and make home and community-based services and supports available to anyone who so chooses.
- **Assist all Medicaid beneficiaries now in institutional settings** to move to the community, as occurs in "Money Follows the Person" grants currently in practice.
- **Serve all of Medicaid beneficiaries on waiting lists** for services and supports.
- **Enable beneficiaries to direct their community supports** through self-determination, budgets, person-directed planning, and consumer-directed peer supports.
- **Allow Medicaid dollars to be used to supplement beneficiaries’ SSI/SSDI benefits** for room and board costs.
- **Coordinate and make available all federal and state sources** to provide needed technology to ensure accessibility, communication and mobility.
- **Provide a Social Security Waiver, and/or changes in policy/regulation** that will remove the disincentives to work in the SSI/SSDI programs.
- **Provide the mechanism to save in savings accounts** targeted to improving the quality of life of Medicaid beneficiaries without jeopardizing benefits.
- **Add a new benefit for direct support workers** that will enable them to create matched savings accounts (similar to Individual Development Accounts) for housing down payments, post secondary education, training opportunities, and transportation.

- **Allow families and friends to supplement meager public benefits by providing resources in special trust accounts** that will be tax deductible and available to provide assistance with housing, work, transportation and other important quality of life expenses.

If you agree with the above premises and this proposed solution, we urge you to become a signatory to this plan. [Click Here to read the Bi-Partisan Call](#). Click the following link to [Sign on in Support of the Bi-Partisan Call](#) or go to www.centerforself-determination.com and click on the “*Medicaid Transformation*” button.

Click the following link to read the long version of this plan entitled, [The Perfect Storm: The Impending Collapse of Medicaid and a Plan for Transformation](#)

To review the CMS actuarial report: <http://www.centerforself-determination.com/docs/MedicaidReport2008.pdf>
or go to <http://www.cms.hhs.gov/ActuarialStudies/downloads/MedicaidReport2008.pdf>

Original Signers:

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