



Maryland Medicaid Long-Term Services and Supports

Maryland Demographic Trends

By 2030, the number of Maryland residents aged 65 and older is expected to nearly double, from 726,000 to 1.3 million. The number of persons aged 5 to 64 with disabilities is expected to reach 385,000.

Figure 1. Maryland Projected Population by Age Group, 2000 - 2030 (Thousands)

Age Group	2010 Projected Population	2020 Projected Population	2030 Projected Population	Percent Change 2010-2030
Under 65	5,053	5,313	5,348	6%
65 and Over	726	1,027	1,336	84%
Total	5,779	6,339	6,684	16%

Source: Maryland Department of Planning.
Total population projections by age, sex and race, 2009.

Medicaid's Role in Providing Long-Term Services and Supports

Medicaid is the primary payer for long-term services and supports, financing services in the community (through home and community-based services waivers) and in nursing facilities (NFs). While individuals requiring long-term services and supports span all ages, the majority are aged 65 and older.

Medicaid Home and Community-Based Services Waivers

Three of Maryland's nine waivers—Older Adults Waiver (OAW), Living at Home (LAH) Waiver, and Medical Day Care (MDC) Waiver—target older adults and adults with disabilities. These

waivers provide community-based services such as personal and attendant care, assisted living services, dietitian/nutrition services, case management, environmental assessments and adaptations, assistive technology, and medical day care to low-income older adults and persons with disabilities. Medicaid waiver participants must meet financial and medical criteria.

Individuals in the community who wish to enroll in a waiver must place their names on the Waiver Services Registry. As of June 2008, there were 12,492 individuals on the OAW registry and 2,114 individuals on the LAH Waiver registry. Eligible waiver applicants residing in nursing homes are enrolled in waivers regardless of slot availability.

Figure 2. Eligibility Criteria for Medicaid Waivers in 2009

Waiver	Age	Financial	Medical
OAW	50 and older	Monthly income less than \$2,200 Assets of no more than \$2,000 to \$2,500	Nursing Home Level of Care
LAH	18 to 64		
MDC	16 and older		

Figure 3. Recipients of Medicaid Long-Term Services and Supports

	FY 2006	FY 2007	FY 2008	FY 2009
OAW	3,582	3,637	3,576	3,594
LAH	474	542	580	606
MDC				4,107
NF	23,597	23,180	22,677	22,314

Medicaid Expenditures for Long-Term Services and Supports

In FY 2009, total Medicaid expenditures for services provided to OAW participants were \$113.9 million, of which \$93.3 million (82%) was for waiver-specific services. Total Medicaid expenditures for LAH Waiver participants were \$29.1 million, with \$22.6 million (78%) for waiver-specific services. Total Medicaid expenditures for participants in MDC, the state's new medical day care waiver, were \$90.9 million.

Figure 4. Total Medicaid Expenditures for Waiver Participants, by Waiver and Service Category, FY 2009 (\$ Thousands)

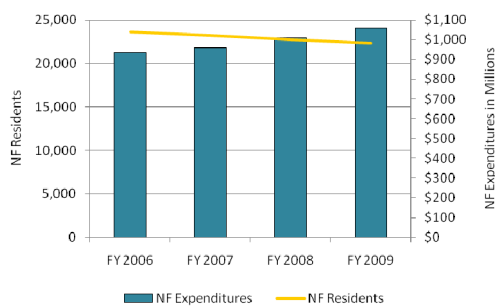
Expenditures				
	Waiver	Non-Waiver	Pharmacy	Total
OAW	\$93,350	\$18,479	\$2,092	\$113,922
LAH	\$22,601	\$5,846	\$640	\$29,086
MDC	\$51,300	\$35,914	\$3,777	\$90,991

Note: Medicaid non-waiver expenditures are for services received under the Maryland Medicaid State Plan.

Medicaid Nursing Facility Services

While the number of nursing facility residents decreased 6% from FY 2006 to FY 2009, Medicaid nursing facility expenditures increased 13%.

Figure 5. Medicaid Nursing Facility Expenditures, FY 2006 - FY 2009



Total Medicaid Expenditures for Long-Term Services and Supports

In FY 2009, expenditures for Medicaid home and community-based services waivers (OAW, LAH, and MDC) and Medicaid nursing facility payments totaled \$1.2 billion.

Dual Eligibles

In FY 2009, 109,832 low-income adults and persons with disabilities in Maryland were enrolled in both Medicaid and Medicare for at least one month during the year. Two-thirds (73,546) of these “dual eligibles” had full Medicaid benefits, which includes payment for acute care services not covered by Medicare, such as Medicare premiums and cost-sharing, as well as long-term services and supports. The remaining third (36,286) of dual eligibles, such as Qualified Medicare Beneficiaries who meet higher income standards, receive partial Medicaid benefits covering just Medicare premiums and cost-sharing. In FY 2009:

- Over half (51%) of dual eligibles were originally enrolled in Medicare due to a disability.
- Nearly two-thirds (63%) were females.
- Over half (57%) were over the age of 65.

In FY 2009, more than 90% of OAW participants, 60% of LAH participants, and 75% of MDC participants were dual eligibles.

Figure 6. Number of Dual Eligibles by Waiver, FY 2009

	Dually Eligible	Non-Dually Eligible	Total Waiver Participants	Percent Duals
OAW	3,234	360	3,594	90%
LAH	361	245	606	60%
MDC	3,079	1,028	4,107	75%