

**U.S. Department of Health and Human Services**  
Centers for Medicare & Medicaid Services  
Office of Research, Development, and Information  
7500 Security Boulevard  
Baltimore, Maryland 21244-1850



2006 Edition

# Active Projects Report

Research and Demonstrations in Health Care Financing

## Theme 9

### Ancillary Research Services





## Theme 9: Ancillary Research Services

**Summary:** Improving the nation's health status and the strength of government health care programs is a priority to the Congress as well as to the federal agencies. Each year, Congress sets certain priorities in health care research that include projects relating to Medicare, Medicaid, and other CMS programs. In some cases, Congress passes specific new programs to support these research priorities, and in others it earmarks part of the Agency's general appropriations to support the projects. CMS implements these Congressional funding directives and provides technical support and oversight over the life of the project. The following projects represent the majority of research projects that CMS initiated as a result of a specific Congressional mandate.

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### Aging and Disability Resource Center Grant

**Project No:** 11-C-91939/01-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$397,500  
**Principal Investigator:** Ann Hartstein  
**Award:** Grant  
**Awardee:** Massachusetts Executive Office of Elder Affairs  
 One Ashburton Place, Room 517  
 Boston, MA 02108

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered "one-stop shop" entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

### Aging and Disability Resource Center Grant

**Project No:** 11-C-91926/4-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$399,972  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Florida, Department of Elder Affairs  
 4040 Esplanade Way, Suite 152  
 Tallahassee, FL 32339-7000

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered "one-stop shop" entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91927/6-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$396,631  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services  
 329 Donaghey Plaza South, PO Box 1437  
 Little Rock, AR 72203

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91928/0-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to February 2007  
**Funding:** \$399,790  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Alaska Housing Finance Corporation  
 P.O. Box 101020  
 Anchorage, AL 99510-1020

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry

points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91930/03-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$423,457  
**Principal Investigator:** William E. Lytton, Jr.  
**Award:** Grant  
**Awardee:** West Virginia Bureau of Senior Services, Program Unit  
 1900 Kanawha Boulevard, East, Building 10  
 Charleston, WV 25305

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** This project is in its start-up phase. ■

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#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91931/7-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$400,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Iowa Department of Elder Affairs  
 200 10th Street, Clemens Building,  
 3rd Floor  
 Des Moines, IA 50309-3609

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91933/01-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$396,970  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Rhode Island Department of Elderly Affairs  
 35 Howard Avenue, Benjamin Rush Building #55  
 Cranston, RI 02920

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry

points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to makes progress in meeting its goals. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91935/9-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$399,999  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** California Department of Aging  
 1600 K Street  
 Sacramento, CA 95814

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91937/5-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$400,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Illinois Department on Aging  
 421 East Capital Ave.  
 Springfield, IL 62701

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91938/5-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$389,405  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Indiana Division of Disability, Aging and Rehabilitation  
 402 W. Washington St, Room W-451, P.O. Box 7083  
 Indianapolis, IN 46207-7083

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be

based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91940/05-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$391,742  
**Principal Investigator:** Krista Boston  
**Award:** Grant  
**Awardee:** Minnesota Board on Aging  
 444 Lafayette Road, North  
 St Paul, MN 55155-3843

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Description:** The County of Sacramento conducted a health insurance premium subsidy program for low-income employees and dependents. This pilot program addressed the health access needs of these individuals through a health insurance premium subsidy program called SacAdvantage. SacAdvantage utilized the services of an existing statewide small employer health insurance purchasing pool, PacAdvantage, to provide choice of health plan, simplicity of administration, and bargaining leverage in the health care market. Funds in the project were used for direct payment of premium subsidies for qualifying low-income employees of small employers.

**Status:** This grant was conducted during the period September 30, 2003 through September 29, 2004. ■

**Sustaining Culture Change in LTC Facilities for the Elderly**

**Project No:** 18-P-91857/03-02  
**Project Officer:** Mary Clarkson  
**Period:** September 2003 to September 2006  
**Funding:** \$297,350  
**Principal Investigator:** Kim Colley  
**Award:** Grant  
**Awardee:** Jefferson Area Board for Aging  
 674 Hillsdale Ave., Suite 9  
 Charlottesville, VA 22901

**Description:** This grant continues work started under prior year Congressional funding. The current project has been designed to identify, demonstrate, and widely disburse interventions for long-term care facilities (nursing homes and assisted living facilities) that are designed to improve the well-being of residents, staff, administrators, family members, and involved public. These interventions include the following: measurement tools, training tools for staff, an “embracing elderhood” intergenerational program, and research on risks involved with these interventions in long-term care with consideration of how to balance risk with quality of life and well-being.

**Status:** This grant was awarded for FY 2003, FY 2004, and FY 2005, and the project is underway. ■

**Sustaining the Access Health “Three-Share” Model of Community Health Coverage: Marketing the Product and Managing the Risk**

**Project No:** 18-C-92395/05-01  
**Project Officer:** Carl Taylor  
**Period:** August 2004 to July 2006  
**Funding:** \$948,200  
**Principal Investigator:** Peter Sartorius  
**Award:** Grant  
**Awardee:** Muskegon Community Health Project  
 565 West Western Ave  
 Muskegon, MI 49440

**Description:** This is a continuation grant that will build on earlier (2004) research that contributed a project design and evaluation. The purpose of Access Health is to provide an affordable health coverage product to a niche of small businesses and their employees who are able to assist in payment of coverage, but unable to participate at commercial levels. Funding comes from three sources: employer, employee, and community. Thus, the funding structure is a Three-Share model. The goal of the project is to continue to reduce the number of uninsured people in Muskegon County.

**Status:** This grant was awarded in FY 2002, FY 2004 and FY 2005, and the project is underway. This is a continuation of Grant # 18-P-91721/05-01 and 95-C-91721/05 ■

a) a comprehensive rebalancing plan for transportation services in Mississippi through the development of a design for a statewide coordinated transportation system;

b) the identification of financing sources for the system to ensure its sustainability;

c) an implementation plan to test the feasibility of the model in one or more sites in the State and to make modifications in the plan to ensure its successful statewide role-out;

d) the organization and education of an active coalition of consumers and other stakeholders to advocate for the development of a transportation system to ensure the accessibility of community-based long-term care alternatives.

**Status:** This project is in the start-up phase. ■

#### Real Choice: Rebalancing

**Project No:** 11-P-92538/04-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$249,500  
**Principal Investigator:** Carol Potter  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** The North Carolina Department of Health and Human Services (DHHS) is requesting \$249,500 for a 3-year Rebalancing Project to develop a comprehensive plan to prevent and correct inappropriate placements among adults with disabilities or long-term illnesses. The Project will target those Medicaid-eligible adults who have applied for admission, are waiting to enter, or reside in institutions such as nursing homes. Those persons and their caregivers who are (or were) in a crisis because they cannot obtain needed services will be eligible for these services. Emphasis will be placed on limiting these cases to those who will not require major expenditures and have a good chance to remain/return in the community for some time.

The Rebalancing and 5-year Implementation Plans will describe the target populations, the nature of the diversion/institutionalization services, the role of key stakeholders, the policies and procedures governing service priorities, the schedule of events, etc. The project will be managed by a broadly-based Rebalancing Team consisting of staff, representatives from all involved state

agencies, professional organizations, consumers and service providers, professional organization representing consumers, and technical persons. Its work will be governed by the DHHS Long-Term Care Cabinet headed by the DHHS Assistant Secretary for Long-Term Care and Family Services (Principal Investigator). Subcontractors will conduct and evaluate the pilot-testing of the Rebalancing Plan.

**Status:** This project is in the start-up phase. ■

#### Real Choice: Rebalancing

**Project No:** 11-P-92442/08-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Amy Armstrong  
**Award:** Grant  
**Awardee:** North Dakota, Department of Human Services, (Bismarck)  
 600 E. Boulevard Ave., Dept 325  
 Bismarck, ND 58505-0250

**Description:** This project provides for a stakeholder consultation process, informed by consumers and stakeholders through focus groups, for the development of a new system. The process provides a funding rebalancing and a single point of entry for the elderly and people with disabilities who are considering long-term home- and community-based services and institutional care services.

**Status:** This project is in the start-up phase. ■

#### SacAdvantage Health Insurance Subsidy Program

**Project No:** 18-P-91851/09-01  
**Project Officer:** Carl Taylor  
**Period:** September 2003 to September 2004  
**Funding:** \$695,450  
**Principal Investigator:** Amerish Bera  
**Award:** Grant  
**Awardee:** County of Sacramento, Dept. of Health & Human Resources  
 7001A East Parkway, Suite 500  
 Sacramento, CA 95823

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91941/5-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$399,999  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Wisconsin Department of Health and Family Services  
 One West Wilson Street, PO Box 7850  
 Madison, WI 53701

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91942/03-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$424,000  
**Principal Investigator:** Lisa Mullin  
**Award:** Grant  
**Awardee:** Maryland Department of Aging  
 301 West Preston Street, Suite 1007  
 Baltimore, MD 21201

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry

points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91944/08-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$370,621  
**Principal Investigator:** Charles Rehbein  
**Award:** Grant  
**Awardee:** Montana DPHHS-Senior LTC Division, State Office on Aging  
 P.O. Box 4210  
 Helena, MT 59604

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91945/02-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$422,962  
**Principal Investigator:** Nancy Day  
**Award:** Grant  
**Awardee:** NJ Dept of Health & Senior Services, Division of Aging & Community Services  
 P.O. Box 807  
 Trenton, NJ 08625-0807

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91946/6-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$399,450  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** New Mexico Aging and Long-Term Care Department  
 228 East Palace Avenue  
 Santa Fe, NM 87501

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that

will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91947/4-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$400,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

community-based care, which supports consumer choice. Such an instrument could help consumers make more informed choices, make the process more predictable for providers, improve the operation of the evolving long-term care system, and allow the system to function in a more fiscally responsible and accountable manner.

A new instrument and process will: be more objective; help consumers identify the program that best meets their needs; be more respectful of applicant’s time; help identify nursing facility residents who have potential for transition to community living; and reduce the financial risk of providers by providing more timely decisions. Faster eligibility determination would increase the likelihood of appropriate community-based placement. And a computer-based assessment instrument could provide administrators with better information to manage programs and quality.

With the overall goal of improving access to community-based care, the project expects to produce the following outcomes: (1) Improve access to services, resulting in a decrease in eligibility decision-time from seven days to one; (2) Improve client choice of services, resulting in a higher proportion of consumers choosing and being served in community-based care; (3) Rebalance long-term care expenditures, resulting in expenditures growing less rapidly as clients are served in lower cost settings; (4) Improve public accountability through more objective, reliable, and consistent long-term care admission criteria.

This project consists of five main activities: (1) Project start-up; (2) Needs assessment, instrument selection, and parallel testing to calibrate the instrument; (3) Regulatory approval; (4), Statewide implementation; and, (5) Operations monitoring, evaluation and reporting. Several intermediate products will be produced by the grant project. A requirements report will be produced from the needs assessment activity. A new assessment instrument will be selected and a process defined. Parallel test (compared to current instrument) results will be used to create a final instrument. Rules approval will lead to statewide implementation of the new instrument and process.

The State of Tennessee is requesting \$291,382 to implement this project. A new instrument and process will help Tennessee achieve its goal of a long-term care system that facilitates access and provides choice for individuals seeking long-term care.

**Status:** This project is in the start-up phase. ■

**Real Choice: Rebalancing**

**Project No:** 11-P-92496/04-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$282,700  
**Principal Investigator:** Jake Hutchins  
**Award:** Grant  
**Awardee:** Mississippi, Department of Human Services  
 Bureau of Mental Health 239 Lamar St.  
 Jackson, MS 39201

**Description:** The Mississippi Department of Mental Health, in partnership with the Mississippi Division of Medicaid and other consumer and stakeholder organizations, will develop a plan for the design and implementation of a system of statewide, coordinated transportation services for adults and children of all ages with a disability. This system will provide accessibility by these persons to long-term support services anywhere in the State. This comprehensive accessibility to community-based services will give them a full range of non-institutional options for care based on service choices they make for themselves. The overall goals for the development and implementation of the plan for a system of statewide coordinated services are briefly described below:

Goal 1: Develop a model for a statewide coordinated transportation system for Mississippi that will ensure self-directed access by adults and children with disabilities to community-based services that will provide them with long-term support, thereby reducing or eliminating their need for institutional services.

Goal 2: Develop a financing plan for the Statewide coordinated transportation system that will ensure its long-term sustainability.

Goal 3: Develop a comprehensive plan to monitor the operation of the Statewide coordinated transportation system for quality, reliability, cost-effectiveness, and stakeholder satisfaction.

Goal 4: Develop a plan for the implementation of the model for the statewide coordinated transportation system in one or more test sites.

The total amount of funds requested for the 3-year project is \$282,700. The Department of Mental Health will provide a non-financial contribution of staff time in the amount of \$14,135.

The outcomes and products of the proposed project include:

**Description:** In the past 10 years, Virginia has increased home- and community-based options for people with mental retardation and developmental disabilities through the provision of Home and Community Based Waivers. More recently, consumer-direction within waivers has given individuals greater choice, control, and responsibility for some services. Over the past year, the number of people using consumer-directed services has significantly increased. These changes have occurred in a service delivery system that was built on philosophical tenets and administrative structures that support programs and that rely on professionals to make service decisions and determinations.

The proposed Rebalancing Initiative targets the issue in Virginia of individuals planning, selecting, and managing their own services. To accomplish this, the project will focus its work strategies in two areas to increase access to and the availability and diversity of home- and community-based long-term services and supports. The first area involves the design, development, and piloting of materials and processes to increase the use of person-centered thinking, planning, and services for individuals who are targeted to receive new waiver slots, including the development of resources that explore multiple options for support. A subset of the materials will be designed with a specialized focus on person-centered discharge planning for individuals transitioning from state training centers and who are targeted to receive new waiver slots. The second area examines mechanisms and strategies for determining how additional services can become consumer-directed in the current waivers. This is a step toward greater self-direction of key supports and will benefit all waiver recipients, including those leaving institutions. The selected areas have the potential to expand community options for supports and shift the balance in Virginia by focusing on the individual's preferences and choices rather than on the service systems' programs and requirements. Both of the areas for rebalancing build on work that is currently being reinforced through Real Choice Systems Change initiatives.

The outcomes of the rebalancing initiative include:

1. Individuals with disabilities, family members, case managers, providers, and other supporters receive knowledge, tools, and resources to design person-centered plans and receive information and processes to maximize informed choice in the selection of services and service providers.
2. Individuals currently in state training centers and individuals currently on the statewide urgent waiting list for MR Waiver are afforded maximum opportunities to choose, design, and manage needed community support and services.
3. Additional services are targeted to be consumer-directed in Virginia's Mental Retardation and Developmental Disabilities Waivers as a result of

analysis of existing barriers; this project will propose the development of definitions, processes, and procedures.

Product include: (a) materials that organize person-centered thinking, planning, and services in formats useful for individuals, family members, case managers, providers, and other supporters; (b) resource documents that explain informed and meaningful choices and provide an array of options for community support and service possibilities; (c) a report that describes the pilot demonstration, including methods, findings, and results; (d) a report listing the findings of research from other States and outlining additional prospective CD services and definitions for services; (e) a rebalancing plan to be submitted to key State agencies and leaders; and (f) an implementation plan that addresses how Virginia can integrate and continue the work of this initiative, including how these efforts eventually become a part of a greater reform effort.

**Status:** This project is in the start-up phase. ■

#### Real Choice: Rebalancing

**Project No:** 11-P-92566/04-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$291,382  
**Principal Investigator:** Pat Santel  
**Award:** Grant  
**Awardee:** Tennessee Department of Finance and Administration  
 DMR, 500 Deaderick St., 15th Floor,  
 Andrew Jackson Bldg  
 Nashville, TN 37243

**Description:** The goal of the project is to improve client access to community-based care by implementing a comprehensive client assessment instrument and process. This project is an integral part of a plan to rebalance long-term care in Tennessee by developing a long-term care system. A new instrument, designed to give individuals timely choice of service alternatives, will remove a serious barrier to accessing community care.

Implementation of a plan for components of a long-term care system is already underway. But during discussions by the stakeholder advisory committee, the critical need to replace the existing client assessment instrument became obvious. A new client assessment instrument and process, giving individuals seeking long-term care timely choices and reliable information for care-planning is needed. Tennessee needs a comprehensive assessment instrument and process, designed for facility and

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91949/03-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$404,920  
**Principal Investigator:** Gregory Howe  
**Award:** Grant  
**Awardee:** Commonwealth of Pennsylvania,  
 Department of Aging  
 303 Forum Building  
 Harrisburg, PA 17101-1919

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered "one-stop shop" entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91950/04-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$424,000  
**Principal Investigator:** Sue Scally  
**Award:** Grant  
**Awardee:** South Carolina Department of Health & Human Services - Bureau of Senior Services  
 P.O. Box 8206  
 Columbia, SC 29202-8206

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that

will provide citizen-centered "one-stop shop" entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

#### Aging and Disability Resource Center Grant

**Project No:** 11-C-91952/4-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$399,999  
**Principal Investigator:** Grant  
**Award:** Georgia Department of Human Resources  
 Division of MHDDAD, Two  
 Peachtree Street, NW. 22.224  
 Atlanta, GA 30303

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered "one-stop shop" entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91953/01-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$406,619  
**Principal Investigator:** Christine Gianopoulos  
**Award:** Grant  
**Awardee:** Maine Department of Human Services, Bureau of Elder and Adult Services  
 11 State House Station  
 Augusta, ME 04333

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91959/06-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$423,999  
**Principal Investigator:** Mary Tonore  
**Award:** Grant  
**Awardee:** Louisiana Governors Office of Elderly Affairs  
 412 North 4th Street - 3rd Floor  
 Baton Rouge, LA 70802

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that

will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91964/0-01  
**Project Officer:** Joseph Razes  
**Period:** July 2004 to June 2007  
**Funding:** \$100,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** CMNI/Department of Community and Cultural Affairs  
 Caller Box 10007  
 Saipan, Northern Mariana Island,  
 96950

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** The project is underway. ■

**Real Choice: Quality Assurance and Improvement in HCBS**

**Project No:** 11-P-92570/04-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$475,000  
**Principal Investigator:** Linda Mabile  
 Steven Dunaway  
 Grant  
**Awardee:** Agency for Persons w/ Disabilities  
 4030 Esplanade Way Suite 380  
 Tallahassee, FL 32399

**Description:** The purpose of this project is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement strategies for the State’s HCBS waivers.

**Status:** The project is underway. ■

**Real Choice: Rebalancing**

**Project No:** 11-P-92450/5-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Michele Piel  
**Award:** Grant  
**Awardee:** Illinois Department on Aging  
 421 East Capital Ave.  
 Springfield, IL 62701

**Description:** Illinois’s Initiatives to Increase Community Services for Frail Elderly addresses the planning capacity needs associated with designing a framework for the retooling of Illinois’s long-term care system. This will enable elderly nursing facility residents the opportunity to choose to return to their homes and communities.

Illinois’s seniors have identified that the inaccessibility of some services hinders their ability to remain in their homes or transition from nursing facilities. Seniors and their caregivers have also indicated that obtaining information regarding service availability is difficult and confusing. Illinois’s existing provider network provides a strong foundation and community presence to implement long-term care reform. The additional tools and resources developed through this initiative will enhance Illinois’s capacity to develop a community

reintegration program for the frail elderly. The program design for the Rebalancing Initiative includes a total budget of \$331,127. A Program Coordinator will be retained to implement the following goals and objectives, and produce the associated deliverable products:

- I. Determine the capacity of current service system to identify deficiencies and any barriers to filling gaps.
    - Clarify roles and responsibilities of existing aging network providers participating in the reintegration process.
    - Create an inventory and analyze services available by county and by Chicago neighborhoods.
    - Create an inventory and analyze available, affordable, and appropriate housing options by county and by Chicago neighborhood.
    - Assess level of funding or lack of funding to provide services to transitioning seniors.
    - Develop strategy to address funding needs.
  - II. Identify consumer needs and preferences.
    - Convene focus groups of seniors to identify additional service needs and prioritize those needs.
    - Convene forums of IDoA’s stakeholder network to develop a strategy to meet consumer needs and preferences.
  - III. Develop a quality assurance strategy and tools to ensure quality of services.
    - Establish uniform quality assurance standards that are benchmark performance, person-centered, data driven, and focused on consumer direction.
    - Conduct comparative analysis of the actual costs associated with nursing facility residents returning to their homes and communities.
- Status:** This project is in the start-up phase. ■

**Real Choice: Rebalancing**

**Project No:** 11-P-92492/03-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Betty Browder  
**Award:** Grant  
**Awardee:** Virginia Commonwealth University  
 Partnership for People w/  
 Disabilities  
 P.O. Box 980568  
 Richmond, VA 23298-0568

**Real Choice: Quality Assurance and Improvement in HCBC**

**Project No:** 11-P-92477/01-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$498,988  
**Principal Investigator:** Diane Langley  
 Linda Paquette  
**Award:** Grant  
**Awardee:** New Hampshire, Department of Health and Human Services, (Pleasant St) 105 Pleasant St Concord, NH 03301

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

**Real Choice: Quality Assurance and Improvement in HCBC**

**Project No:** 11-P-92532/02-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$475,000  
**Principal Investigator:** Kelli Rice  
**Award:** Grant  
**Awardee:** New Jersey Department of Human Services, Division of Developmental Disabilities 50 E State Street Trenton, NJ 08625-0726

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

**Real Choice: Quality Assurance and Improvement in HCBC**

**Project No:** 11-P-92540/01-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$499,226  
**Principal Investigator:** Steven Staugaitis  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School 545 Lake Avenue North Worcester, MA 01655

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

**Real Choice: Quality Assurance and Improvement in HCBC**

**Project No:** 11-P-92553/06-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$500,000  
**Principal Investigator:** Herb Sanderson  
 Kris Baldwin  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services 329 Donaghey Plaza South, PO Box 1437 Little Rock, AR 72203

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

**Aging and Disability Resource Center Grant**

**Project No:** 11-C-91934/01-01  
**Project Officer:** Joseph Razes  
**Period:** September 2003 to September 2006  
**Funding:** \$424,000  
**Principal Investigator:** Edgar J. Helms  
**Award:** Grant  
**Awardee:** University of New Hampshire, Office of Sponsored Research Service Building, 51 College Road Durham, NH 03824-3585

**Description:** The Aging and Disability Resource Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will help States to develop Aging and Disability Resource Center programs that will provide citizen-centered “one-stop shop” entry points into the long-term support system and will be based in local communities accessible to people who may require long-term support. Resource Centers will serve individuals who need long-term support, their family caregivers, and those planning for future long-term support needs. They will also serve as a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities. The grants were jointly issued as cooperative agreements by the Administration on Aging and the Centers for Medicare & Medicaid Services.

**Status:** Grantee continues to make progress in meeting its goals. ■

**Community-Based Treatment Alternatives for Children**

**Project No:** 11-P-92030/05-01  
**Project Officer:** April Forsythe  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Amy Starin  
**Award:** Grant  
**Awardee:** Illinois Dept. of Human Service 4200 Oak Park Avenue Chicago, IL 60607

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system,

through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals, and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of “hospital” so they do not qualify as institutions against which states may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** The grantee is finished with its feasibility study and is in the implementation stage right now. It has found that some changes can be implemented without completing a waiver. ■

**Community-Based Treatment Alternatives for Children**

**Project No:** 18-P-92001/03-01  
**Project Officer:** Peggy Clark  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Albert Zachik  
**Award:** Grant  
**Awardee:** Maryland Department of Health and Mental Hygiene 55 Wade Ave. Catonsville, MD 21228

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system, through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals, and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of “hospital” so they do not qualify as institutions against which states may measure § 1915(c) waiver

costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** This project is making progress on its goals and activities. ■

#### Community-Based Treatment Alternatives for Children

**Project No:** 18-P-92003/06-01  
**Project Officer:** April Forsythe  
**Period:** September 2003 to September 2006  
**Funding:** \$93,600  
**Principal Investigator:** Susan Syler  
**Award:** Grant  
**Awardee:** Texas, Health and Human Services Commission  
 P.O. Box 13247  
 Austin, TX 78711-3247

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system, through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals, and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of “hospital” so they do not qualify as institutions against which states may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** This project is in the start-up phase. ■

#### Community-Based Treatment Alternatives for Children

**Project No:** 18-P-92043/07-01  
**Project Officer:** April Forsythe  
**Period:** September 2003 to September 2006  
**Funding:** \$99,821  
**Principal Investigator:** Linda Roebuck  
**Award:** Grant  
**Awardee:** Missouri Department of Mental Health  
 P.O. Box 687  
 Jefferson City, MI 65101

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system, through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals, and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of “hospital” so they do not qualify as institutions against which states may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** Unclear due to incompleteness of Annual Report. ■

specifically for SSI-eligible youth as they age out of children’s services.

**Status:** The project is underway. ■

#### Real Choice: Quality Assurance and Improvement in HCBS

**Project No:** 11-P-92438/09-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$500,000  
**Principal Investigator:** Dianne Wagemann  
 Lawrence Gallagher  
 Grant  
**Award:** Arizona, Department of Economic Security  
 P.O. Box 6123  
 Phoenix, AZ 85005

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

#### Real Choice: Quality Assurance and Improvement in HCBS

**Project No:** 11-P-92585/00-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$417,849  
**Principal Investigator:** Fran Arseneau  
**Award:** Grant  
**Awardee:** Alaska, Department of Health and Social Services  
 P.O. Box 110601  
 Juneau, AK 99811-1601

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement strategies for the State’s HCBS waivers.

**Status:** The project is underway. ■

#### Real Choice: Quality Assurance and Improvement in HCBS

**Project No:** 11-P-92458/07-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$470,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska, Department of Health and Human Services  
 301 Centennial Mall S, 5th Floor, P.O. Box 95044  
 Lincoln, NE 68509-5026

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

#### Real Choice: Quality Assurance and Improvement in HCBS

**Project No:** 11-P-92462/01-01  
**Project Officer:** Crystal High  
**Period:** September 2004 to September 2007  
**Funding:** \$499,709  
**Principal Investigator:** Joe Carlomagno  
**Award:** Grant  
**Awardee:** Vermont, Agency of Human Services  
 103 S. Main St  
 Waterbury, VT 05671-1601

**Description:** The purpose of this grant is to develop a system-wide quality management system for all HCBS waivers and to design and implement a methodology to secure participant feedback information to apply quality assurance and quality improvement.

**Status:** The project is underway. ■

interventions in children's mental health. The overall goals of our project for Minnesota are to:

- Expand and update the scientific information available to providers and families for guiding decisions about children's care
- Improve the service quality of the children's mental health system of care
- Establish a fully operational system that improves outcomes for children and families

We are requesting \$300,000 from Centers for Medicare & Medicaid Services to help fund the design, implementation and evaluation of our project. This grant opportunity is the catalyst Minnesota requires to provide evidence-based services to families and providers serving Medicaid children with mental health needs. We were encouraged by our conversation that CMS is receptive to a proposal oriented to transforming practices for children.

Ultimately the outcomes will be a Statewide system that improves clinical and functional outcomes for children. Parents and providers will have more choices in planning and treating children. These system changes will also result in less institutional treatment of children and more efficiencies in our state's Medicaid system. At the end of year 3, we will have a fully operational evidence-based practices database accompanied by strengthened collaborative consumer/provider relationships, customized training materials, enhanced claims and authorization systems, a continuous quality monitoring system, and evaluation reports.

Using Evidence to Transform Systems promises to be very visible and successful for Minnesota. This project will positively impact other services and systems in our state and eventually our region.

**Status:** The project is underway. ■

#### Real Choice: Portals from EPSDT to Adult Supports

**Project No:** 11-P-92505/03-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$499,649  
**Principal Investigator:** Shauna Spencer  
**Award:** Grant  
**Awardee:** District of Columbia, Department of Mental Health  
 64 New York Avenue, NE - 4th Floor  
 Washington, DC, DC 20002

**Description:** This initiative will attempt to identify and put in place the mechanisms to assist foster care children with mental health disorders to receive the supportive services they need as they age out of the foster care system.

This grant will examine and refine current methods for identifying children in foster care in need of mental health services and ensure they are referred to supportive services to meet their needs after they leave the foster care system. In addition, it will review and refine current regulations, policies and program offering mental health assessment and supports to foster care children to identify gaps and eliminate duplicative services. It will also establish a Medicaid funding stream to fill gaps in existing services and provide a mechanism that coordinates mental health services provided to foster care children and prepares them for transition to service under the Medicaid Rehabilitation Option and funding sources.

**Status:** The project is underway. ■

#### Real Choice: Portals from EPSDT to Adult Supports

**Project No:** 11-P-92578/07-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$500,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska, Department of Health and Human Services  
 301 Centennal Mall S, 5th Floor, P.O. Box 95044  
 Lincoln, NE 68509-5026

**Description:** This project goal is to improve access to adult-focused tertiary and specialized medical care for SSI-eligible youth transitioning from EPSDT to adulthood. The project will develop an amendment to Nebraska's Home and Community Based Aged and Disabled Waiver which will modify the assessment process used for persons transferring from children's services to adult services. It will also include: (1) a medical transition component; (2) coordinate training for the general practitioners so they are ready to serve young adults on the waiver; (3) it will implement a pilot project with a rural school district that will integrate medical transition assessment; and (4) start designing required transition plans for employment preparation; and (5) create a transition clinic as part of the Medically handicapped Children Program's Specialty clinics,

#### Community-Based Treatment Alternatives for Children

**Project No:** 11-P-92008/04-01  
**Project Officer:** April Forsythe  
**Period:** September 2003 to September 2006  
**Funding:** \$99,000  
**Principal Investigator:** Kristi Plotner  
**Award:** Grant  
**Awardee:** State of Mississippi - Office of the Governor, Div of Medicaid  
 239 North Lamar Street, Suite 801  
 Jackson, MS 39201-1399

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system, through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of "hospital" so they do not qualify as institutions against which states may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** MS is behind on this grant due to problems with staff and State issues. They are just now contracting with another agency to begin the feasibility study (February 2005). ■

#### Community-Based Treatment Alternatives for Children

**Project No:** 11-P-92104/01-01  
**Project Officer:** Peggy Clark  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Annette Shea  
**Award:** Grant  
**Awardee:** Commonwealth of Massachusetts, Division of Medical Assistance  
 One Ashburton Place, 11th Floor  
 Boston, MA 02108

**Description:** The Community-Based Treatment Alternatives For Children Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in developing a comprehensive, community-based mental health service delivery system, through Medicaid, for children with serious emotional disturbances who would otherwise require care in a psychiatric residential treatment facility (PRTF). Currently, Medicaid provides inpatient psychiatric services for children under age 21 in hospitals and extends these Medicaid benefits to children in PRTFs. However, PRTFs do not meet the CMS definition of "hospital" so they do not qualify as institutions against which states may measure § 1915(c) waiver costs. Over the last decade, PRTFs have become the primary providers for children with serious emotional disturbances requiring an institutional level of care; however, states have been unable to use § 1915(c) waiver authority to provide Medicaid-funded home and community-based alternatives to care, which would keep the children in their homes and with their families. The funds available through this solicitation will assist states in assessing community-based alternatives to residential treatment or institutionalization.

**Status:** This project is making progress on its goals and activities. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91613/01  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$900,000  
**Principal Investigator:** Colleen Ives  
**Award:** Grant

**Awardee:** Granite State Independent Living  
PO Box 7268  
Concord, NH 03302-7268

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many states have taken a leadership role in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 11-P-91619/09-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** David Fray  
**Award:** Grant  
**Awardee:** State of Hawaii Department of Health  
P.O. Box 3378  
Honolulu, HI 96801

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding and is making excellent progress toward meeting the grant goals. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 11-P-92065/09  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$600,000  
**Principal Investigator:** Ric Zaharia  
**Award:** Grant  
**Awardee:** Arizona Department of Economic Security, Division of Developmental Disabilities  
1789 West Jefferson  
Phoenix, AZ 85007

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** Grant activities are progressing. Quarterly monitoring calls are ongoing. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 11-P-92140/00-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$585,007  
**Principal Investigator:** Laurie Powers  
**Award:** Grant  
**Awardee:** Portland State University  
P.O. Box 751  
Portland, OR 97207-0751

#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92544/0-01  
**Project Officer:** April Forsythe  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Laurie Powers  
**Award:** Grant  
**Awardee:** Portland State University  
P.O. Box 751  
Portland, OR 97207-0751

**Description:** The Peer Expertise Network: Building Peer-Operated Supports for Recovery Project Goals. The Peer Expertise Network will facilitate mental health system transformation by establishing a statewide infrastructure for peer-operated supports, delivered as an evidence-based practice and integrated within the fabric of current services for mental health consumer/survivors. Major project goals include:

- Develop and expand peer operated programs and services throughout Oregon, promoting recovery through peer-to-peer support, education and advocacy as a complement to professional support.
- Facilitate the incorporation of peer-operated programs and services within Oregon's evidence-based practice mandate as well as the active participation of consumer/survivor leaders in the implementation and evaluation of other evidence-based practices.
- Identify policy improvements, collaboration strategies, and funding mechanisms that facilitate the sustainability of peer-operated programs and services.
- Increase consumer/survivor leader and group participation and collaboration at all levels in service and policy design, implementation, and oversight.
- Carefully document and evaluate the process and impact of incorporating peer-operated services on mental health systems transformation.

**Budget:** The total budget for this two-year project is \$300,000.

**Project Description:** The PEN Project will be conducted by Portland State University, the designated instrumentality, in close partnership with the Office of Mental Health and Addiction Services, the Oregon Medicaid Office and mental health consumer leaders. PEN will undertake a series of interrelated activities designed to increase the utilization, validation and sustainability of peer-operated services. Consumer/survivor leaders will be intensively involved at all levels of the project, leading design, outreach, policy,

evaluation, and dissemination teams. Peer-operated services will be outreach through the development of a network that brings together groups and leaders already skilled in the delivery of peer-based services with groups committed to move toward increasing peer operation. Train-the-trainer tools and approaches for peer support, education and advocacy will be infused as well as peer-guided methods for providing supports, such as person-directed planning, and self-directed employment. A PEN Leadership Conference will be conducted to promote knowledge exchange, to facilitate organizational planning for peer-operated services, and to establish network linkages that bring together consumer/survivor leaders to support one another's efforts. An ongoing collaborative planning effort by consumers, state and local agency, and other leaders will identify policy improvements, collaboration strategies, and funding mechanisms for sustaining peer-operated programs and services.

**Measurable outcomes and products.** Key outcomes will include an increase in: (a) the number of peer-operated programs, (b) the level of evidence-based peer services delivered within those programs, and (c) consumer/survivor involvement in the implementation and evaluation of other evidence-based practices. Products will include evidence-based practice guidelines, benchmarks and tools for structuring and delivering peer-operated services, and a policy and funding framework for incorporating peer-operated services as a standard practice.

**Status:** The project is underway. ■

#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92537/5-01  
**Project Officer:** April Forsythe  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Grant  
**Award:** State of Minnesota, Minnesota Department of Human Services  
**Awardee:** 444 Lafayette Road North  
St Paul, MN 55155

**Description:** Using Evidence to Transform Systems: Science in Service of Children's Mental Health.

The Minnesota Department of Human Services proposes developing and implementing an evidence-based practices database to increase efficacious and effective

and treatment providers in partnership with consumer-directed services invest in person-centered and strengths-based programs with a focus on opportunities and recovery. In addition, a Recovery Center of Excellence will strengthen the power of consumer organizations statewide to participate directly in the state's efforts to transform the current mental health system. The University of Massachusetts Medical School Center for Health Policy and Research (UMMS/CHPR) is requesting \$299,991 to successfully manage this grant. UMMS/CHPR, as a state instrumentality, will partner with the Massachusetts Department of Mental Health, Office of Medicaid, and consumer organizations in implementing this grant. A leadership team with additional State Agency representation and Consumer Partners has been brought together to guide this work. UMMS/CHPR will subcontract with consumer-run agencies to take the lead in soliciting consumer input into this project, and building the RCOE. UMMS/CHPR will also continue to identify other partners and create the systems necessary to ensure their meaningful involvement in this planning opportunity.

**Status:** The project is underway. ■

#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92447/05-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Liz Gitter  
**Award:** Grant  
**Awardee:** Ohio Department of Mental Health, Division of Program and Policy Development  
 30 East Broad Street, 8th Floor  
 Columbus, OH 43215

**Description:** The Ohio Department of Mental Health (ODMH) is partnering with its state Medicaid agency, the Ohio Department of Job and Family Services, to incorporate the evidence-based practice, assertive community treatment (ACT), as a distinct Medicaid Community Mental Health service beginning in July 2005. ODMH is working with consumer groups, providers, and county boards to incorporate peer support specialists into Ohio's ACT teams. If awarded, the Real Choice Systems Change Grant: Mental Health: Systems Transformation will provide funding for training and technical assistance to make that goal a reality. This will increase Ohio's capacity to deliver evidence-based and

recovery-oriented services to Medicaid consumers with mental health needs.

The goals of this grant proposal are:

- To develop a systems transformation white paper which outlines the system changes necessary to promote peer support specialists.
- To develop Statewide protocols describing how consumers can effectively and ethically be peer support specialists on ACT teams.
- To provide training for peer support specialists on how to be an active and effective member of an ACT team.
- To provide training for ACT teams on how to utilize peer support specialists.
- To provide technical assistance for systems change to county boards and providers of ACT services.
- To facilitate the development of mentor relationships and a network for peer support specialists.
- To conduct an evaluation of peer support specialists work and mentor experiences.

ODMH has proposed a total budget of \$315,000 to span the entire 3-year grant period. \$300,000 is requested as federal funds with \$15,000 representing the 5 percent nonfinancial contribution from the Ohio Department of Mental Health.

The measurable outcomes and products of this grant will include a white paper on how to incorporate peer support into ACT which will be disseminated at national mental health conferences. 40 people will be trained as peer support specialists and ACT training will be conducted for providers to support the employment of peer support specialists. In addition, technical assistance will be provided to 20 providers in the first year of the grant and an additional 20 during each of the remaining two years of the grant.

The Real Choice Systems Change Grant: Mental Health: Systems Transformation has the potential to allow Ohio to develop a model for incorporating peer support into ACT teams. When professional staff in mental health programs are trained in peer support as well as able to share their own recovery experience when clinically appropriate, we believe it will have a positive impact on Ohio's mental health system's ability to provide recovery oriented services for all mental health consumers.

**Status:** The project is underway. ■

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is underway. The grant has been transferred to Portland State University. Quarterly monitoring calls are ongoing. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91519/01  
**Project Officer:** Melissa Harris  
**Period:** September 2001 to September 2005  
**Funding:** \$539,730  
**Principal Investigator:** Deborah Florio  
**Award:** Grant  
**Awardee:** Rhode Island, Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The project is underway. A no-cost extension was approved through September 27, 2005. Quarterly monitoring calls are ongoing. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91546/05-01  
**Project Officer:** Mark Reed  
**Period:** September 2001 to September 2005  
**Funding:** \$898,850  
**Principal Investigator:** Deb Holtz  
**Award:** Grant  
**Awardee:** Minnesota, Department of Human Services  
 Human Services Building, 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This grant is in its no-cost extension phase of funding. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91567/06  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$900,000  
**Principal Investigator:** Larry Ward  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services  
 329 Donaghey Plaza South, PO Box 1437  
 Little Rock, AR 72203

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community

Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91570/09  
**Project Officer:** Ronald Hendler  
**Period:** September 2001 to September 2004  
**Funding:** \$655,988  
**Principal Investigator:** Todd Butterworth  
**Award:** Grant  
**Awardee:** Nevada, Department of Employment, Training and Rehabilitation  
 711 South Stewart St  
 Carson City, NV 89701

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The Grant is in an approved one-year no-cost extension. As of September 30, 2004 there remains \$112,773 available for drawdown. 4th year goals: Complete Web-based training module, create a housing registry, and complete the On-line disability Resource Information tool. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91630/08-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** William West  
**Award:** Grant  
**Awardee:** Colorado, Department of Health Care Policy and Financing  
 1570 Sherman Street  
 Denver, CO 80203-1714

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91634/05  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$755,972  
**Principal Investigator:** Brenda Fink  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health  
 320 South Walnut, PO Box 30479  
 Lansing, MI 48909

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many states have taken

comprised of the State Divisions of Medical Assistance and MH/DD/SAS with national, State, and local experts, LMEs, and consumers to develop specific models, guidelines, and targeted technical assistance to achieve the following objectives: 1) increase consumer access to EBPs; 2) ensure and sustain EBP model fidelity through the use of fidelity scales in quality improvement and monitoring activities.

Three LMEs have agreed to participate in this effort. One will develop a model to empower consumers to actively participate in identifying and removing barriers to access to EBPs. Another LME will 1) focus on using new Medicaid service definitions to promote EBPs not previously supported in the state plan, 2) enhance the person centered planning process to include consideration and inclusion of EBPs, 3) seek to improve model fidelity of its assertive community treatment (ACT) teams through the use of fidelity scales in quality improvement activities. The third LME will identify incentives to promote access to the EBP of illness management and recovery, and improve model fidelity of its ACT teams through the use of fidelity scales in quality improvement activities.

The first year of the grant will focus on review and development of models to achieve the stated objectives that will be field tested. The second year will focus on field testing, review and documentation of the experience, and development of an evaluation design for dissemination efforts. The third year will focus on dissemination, training, and technical assistance to implement the field-tested models across the State. Efforts will include workshops, training materials, and considerable technical assistance provided primarily by individuals from the field sites and the grant workgroup. The 3-year budget for this grant proposal is \$311,769, with a request to CMS for \$293,769. There are three measurable outcomes identified: 1) Consumers will have greater access to EBPs as demonstrated by an increase in the number of EBPs offered at the LMEs; 2) EBPs that are offered in the field-testing sites will increase in their fidelity to the model as demonstrated by increased scores on the fidelity instruments in the Dartmouth/SAMHSA toolkits; and 3) Use of these models statewide will increase as demonstrated by an increase in the number of LMEs that adopt these models. Specific products that will be developed are written descriptions of models to be piloted and a description of procedures, progress reports, an evaluation design, modification of models to be disseminated statewide, state policy document promoting the model, training materials and curriculum, ten training workshops to be offered to LMEs across the State, and compact discs to disseminate the models.

**Status:** The project is underway. ■

#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92542/01-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Debra Hurwitz  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School  
 545 Lake Avenue North  
 Worcester, MA 01655

**Description:** Reenergized by the powerful recommendations of Achieving the Promise: Transforming Mental Health Care in America, consumer-directed organizations in partnership with the Massachusetts Department of Mental Health and Office of Medicaid are focusing their attention on building infrastructure to strengthen consumer-directed programs and promote a recovery orientation within the mental health service system. A lack of integration and weak infrastructure has diluted the overall power of consumer voices to transform the system and make recovery a reality. As such, this Real Choice Systems Change Grant represents an exciting opportunity to integrate and crystallize this work. With this grant, Massachusetts will develop a Recovery Center of Excellence (RCOE) that will support and sustain effective recovery-oriented and consumer-directed organizations throughout Massachusetts, and ultimately transform the State's mental health system.

The development of recovery learning centers, supported employment programs, and peer specialists in mental health agencies are all examples of recovery-oriented initiatives that consumer-directed organizations are implementing in Massachusetts. "Recovery-oriented" is defined as those services that are rehabilitative in nature, and are person-centered. In order to build the needed infrastructure to connect and strengthen these efforts, the goals of this grant will be to (1) strengthen the network between all consumer-controlled efforts in place across the state; (2) identify the range of consumer-controlled services needed throughout the state; and (3) Establish a state-level consumer-operated Recovery Center of Excellence that provides training and technical assistance to consumer-controlled programs and traditional mental health providers statewide and impacts state policy regarding mental health services.

All the above components will build capacity within the existing mental health consumer network to take a lead in transforming the mental health system. The ultimate goal will be to ensure that Massachusetts state agencies

- Improved functioning for children, easing the transition to adulthood, reducing reliance on institutional care and services in the adult system by creating family supports and the ability to identify and deal effectively with relapses, advancing toward recovery. Quality services are obtained in an integrated, community living, preparing the child for transition to adulthood.

Delaware is uniquely positioned to succeed:

- Systems of Care values and principles drive the Children's Department with mental health, child welfare, juvenile justice, and a state-of-the-art integrated management information system.

- DCMHS is the single statewide payor for Medicaid children's behavioral health extended services with a statewide provider network and commitment to effective treatment in the least restrictive environment and use of evidence-based practices.

- The Delaware Federation for Families for Children's Mental Health is a statewide family organization and is the family voice driving development of this project.

- Family psycho-education is already a Medicaid-coverable service in Delaware.

- The University of Delaware Center for Disabilities Studies is a strong academic partner with relevant expertise, evaluation capability and has already partnered effectively with DCMHS to produce curriculum for functional behavior analysis.

- Project success will produce statewide use of evidence-based practice.

**Status:** The project is underway. ■

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#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92516/6-01  
**Project Officer:** April Forsythe  
**Period:** September 2004 to September 2007  
**Funding:** \$299,820  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Oklahoma Department of Mental Health and Substance Abuse Services  
 1200 NE, 13th Street  
 Oklahoma City, OK 73117

**Description:** The grant will be utilized to support the Oklahoma Evidence Based Practices Implementation Project. The Project will be managed as part of the

ongoing activities of the OK Adult Outpatient Behavioral Health Collaborative. The Collaborative is sponsored by the OK Dept of Mental Health and Substance Abuse Services, which is the State Mental Health Authority, and the OK Health Care Authority, the State Medicaid Agency. The OK Department of Human Services and the OK Department of Rehabilitative Services also participate in activities of the Collaborative as needed. The mission of the Collaborative is to implement modifications to the OK adult outpatient behavioral health delivery system that will enhance the quality of services provided, focus those services upon recovery and the needs of the consumer, and ensure that state and federally funded health care is purchased in the most efficient and comprehensive manner. The Collaborative intends to utilize the proceeds from the Real Choice System Change Grant to implement two evidence-based practices, the Family Psychoeducation Program and the Illness Management and Recovery Program.

**Status:** The project is underway. ■

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#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92474/04-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$293,769  
**Principal Investigator:** Flo Stein  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** Recently enacted reform legislation in North Carolina has created a public Local Management Entity (LME) whose role is to promote effective, accountable services at the community level, increase access to services, and promote meaningful consumer involvement. The LMEs play a critical role in ensuring that evidence-based practices (EBPs) are developed and accessible at the community level and that EBPs consistently meet model fidelity. As critical as they are, these roles are entirely new for the public system through the LME.

The goal of this proposal is to achieve greater incorporation of EBPs into the mental health system by assisting Local Management Entities (LMEs) to develop infrastructure necessary to support the implementation of EBPs within their local communities. This will be accomplished by a collaborative project workgroup

leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

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#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91647/00  
**Project Officer:** Ronald Hendler  
**Period:** September 2001 to September 2004  
**Funding:** \$300,000  
**Principal Investigator:** Rosanne Ada  
**Award:** Grant  
**Awardee:** Guam, Department of Integrated Services for Individuals with Disabilities  
 396 Chalan Kanton Ladera  
 Talofof, GU 96915

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This grant is in the 4th year with an approved no-cost extension. The 4th year budget is \$187,387. The grantee needs to complete work on implementing the individualized budget program. ■

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#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91654/05-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** Gwen Kilmer  
**Award:** Grant  
**Awardee:** Indiana Family and Social Services Administration  
 402 West Washington Street, P.O.  
 Box 7083  
 Indianapolis, IN 46207-7083

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding. ■

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#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91657/08  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$850,000  
**Principal Investigator:** Karen Antonick  
**Award:** Grant  
**Awardee:** Montana Department of Public Health and Human Services  
 PO Box 4210  
 Helena, MT 59604-4210

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term

illness to live in the community. Many states have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91658/06  
**Project Officer:** Melissa Harris  
**Period:** September 2001 to September 2005  
**Funding:** \$850,000  
**Principal Investigator:** Carey Garland  
**Award:** Grant  
**Awardee:** Oklahoma, Department of Human Services  
 312 NE 28th, Room 101  
 Oklahoma City, OK 73105

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many states have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The project is underway. A no-cost extension has been approved through September 27, 2005. Quarterly monitoring calls are ongoing. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91668/04-01  
**Project Officer:** Ronald Hender  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** Ann Eller  
**Award:** Grant  
**Awardee:** North Carolina DHHS/Division of Mental Health DD/Substance Abuse Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2001

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding and is making excellent progress toward the grant goals. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 11-P-92073/07-01  
**Project Officer:** Ronald Hender  
**Period:** September 2003 to September 2006  
**Funding:** \$549,999  
**Principal Investigator:** Mike Oxford  
**Award:** Grant  
**Awardee:** Topeka Independent Living Resource Center  
 Consortium on Leadership Real Choice, 501 SW Jackson, Suite 100  
 Topeka, KS 66603

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community

In Pennsylvania, the Mental Health Association of Southeastern Pennsylvania (MHASP) partnered with the Montgomery County Office of Mental Health/Mental Retardation/Drug and Alcohol Services, local providers, consumers, and other stakeholders to implement a Certified Peer Specialist (CPS) Program similar to those developed in other states. Through this program, current or former mental health clients are being trained and certified to function as Peer Specialists. These programs assist consumer trainees to better understand peer support, communication skills, cultural competency, outreach, engagement, conflict management, crisis intervention, setting up and sustaining mutual self-help groups, helping clients build their own self-directed recovery tools (including Copeland's 1994, 1997 Wellness Action Recovery Plan, WRAP), and navigating the work place. After certification, Peer Specialists will be considered qualified by Montgomery County to work in various service settings, including Targeted Case Management (TCM), Community Treatment Teams and Mobile Psychiatric Rehabilitation programs. As a result of this work, a protocol was developed for engaging community stakeholders to support this new recovery workforce, a recovery training curriculum was produced, training strategies were finalized, and a class of eighteen (18) consumers became the county and State's first certified peer specialists.

**Goals of OMHSAS System Transformation Grant:** Based on the early success of Montgomery County in the Southeast region and the accolades Peer Specialist Certification programs have received in other states (e.g., Georgia, South Carolina, Arizona, Vermont, New Mexico), OMHSAS plans to use grant funds to support a Peer Specialist Certification Program in the Northeast, Central and Western regions of the state. OMHSAS will contract with the Mental Health Association of Southeastern Pennsylvania to provide technical assistance, conduct the recovery/peer specialist training, and evaluate the effects of the project in those counties that are selected to participate. While engaged in these efforts, OMHSAS will simultaneously work on a State Plan Amendment to win approval to have peer specialist services receive Medicaid reimbursement through the Mental Health Rehabilitation Option.

In summary, OMHSAS is requesting \$300,000 over the three year period of the grant to:

1. Provide three demonstrations to promote the development and expansion of Certified Peer Specialist Programs in each region of the state;
2. Train at least sixty (60) consumers across the state to become Certified Peer Specialists in their local service delivery systems; and
3. Develop and submit a State Medicaid Plan Amendment to allow reimbursement of psychiatric rehabilitation and peer specialist services.

**Status:** The project is underway. ■

#### Real Choice: Mental Health: Systems Transformation

**Project No:** 11-P-92495/3-01  
**Project Officer:** April Forsythe  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Grant  
**Award:** Delaware Department of Services for Children, Youth, and Their Families  
 1825 Faulkland Road  
 Wilmington, DE 19805

**Description:** Delaware will use this grant to create Family Psycho-education for Children and Their Families. Under Delaware's 1115 Medicaid Waiver, there is a public-private partnership for children's behavioral health, however there is no structured or systematic approach to family psycho-education here. Families/consumers tell us this is a critical service gap. The Children's Department's Division of Child Mental Health Services (DCMHS - lead organization), the Federation of Families in Delaware for Children's Mental Health, the University of Delaware's Center for Disabilities Studies and Delaware Medicaid will partner with providers to create this evidence-based practice as an enduring improvement in our system to directly benefit Medicaid children and their families.

**Goal:** Develop, pilot, and disseminate for statewide and public children's behavioral health system-wide use manualized, consumer-driven family psycho-education relating to children's mental illnesses and severe emotional and behavioral disturbances.

**Outcomes to be achieved:**

- Children live in the most integrated community setting appropriate to their individual needs. Families are better informed about their children's illness/problems and understand the disability, learn to use demonstrated-effective strategies and supports so the child can live and function to fullest potential in home/school/community without institutionalization.
- Families become full partners with professionals. Families and children will have the knowledge and skills they need to become full partners with professionals in the child's behavioral health care, exercising meaningful decisions about the services/supports and manner in which they are provided.

**Real Choice: Mental Health: Systems Transformation**

**Project No:** 11-P-92494/01-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$262,318  
**Principal Investigator:** Leticia Huttman  
**Award:** Grant  
**Awardee:** Maine, Department of Human Services  
 11 State House Station  
 Augusta, ME 04333

**Description:** Applicant Organizations: State of Maine Department of Health and Human Services (DHHS), Adult Mental Health Services in cooperation with Maine Department of Health and Human Services, Bureau of Medical Services (BMS); the Maine Peer Support Workgroup and the Center for Learning, Institute for Public Sector Innovation of the Edmund S. Muskie School of Public Service, University of Southern Maine.

The goal of this project is to increase Maine's ability to offer recovery-oriented services to consumers with mental illness by better aligning Maine's Medicaid and mental health systems to (1) build capacity for quality peer supports, self-directed services, other consumer-driven services, and natural supports by developing a peer support Recovery Specialist Certification Program, and in the process (2) strengthen the consumer's role in system and community agency governance, decision-making, planning, and service delivery.

Here are the objectives:

- Develop State peer support Recovery Specialist training and certification program and conduct annual training to produce 20 Recovery Specialist in Year II and 40 more in Year III for total of 60.
- Conduct collaborative activities with MaineCare to align Community Support section of the Medicaid State Plan with new Recovery Specialist program.
- Develop improved consumer-provider-Medicaid relations and increase consumer's community inclusion through education and marketing strategies targeting providers, consumers, natural support networks, and the public.
- Substantially increase numbers of Wellness Recovery Action Planning (WRAP) facilitator trainers (from planned four to seven) and facilitators (70 by end Year III) and Recovery Workbook Group facilitators (18, or six per year) in collaboration with the Advocacy Initiative Network of Maine (AIN), the Maine Association of Peer Support and Recovery Centers (MAPSRC) and other

consumer organizations. • Increase State's capacity to research the evidence-base for, and evaluate the delivery of, consumer-directed recovery-oriented services, with focus on ACT, WRAP, and Recovery Workbook Groups through better tracking of Medicaid claims data for reimbursed services using peer supports, including ACT teams, WRAP, and Recovery Workbook Groups.

- Strengthen consumer governance to shift Maine's MH system toward consumer-directed recovery-oriented services by establishing a state-level Project Advisory Committee and by recommending community agency and program standards for consumer governance and staffing.

- Provide State focal point and leadership to shift Maine's MH system toward the peer support, Recovery approach to services and service delivery.

**Status:** The project is underway. ■

**Real Choice: Mental Health: Systems Transformation**

**Project No:** 11-P-92559/03-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Carol Ward-Colasante  
**Award:** Grant  
**Awardee:** Pennsylvania, Department of Public Welfare  
 P.O. Box 2675  
 Harrisburg, PA 17105-2675

**Description:** Consumer-operated service providers recognize that people who provide peer support services need training to help them develop their knowledge and skills in fostering consumer recovery. In 1999, Georgia had the distinction of becoming the first State to gain approval from the Centers for Medicare and Medicaid Services (CMS) to offer Peer Supports as a billable service. This event was made possible through Georgia's identification of core competencies of peer providers, the development of a recovery training curriculum, conducting training, and certifying a workforce of peer specialists. Under supervision, the peer specialists model recovery, provide peer support, teach skills for coping and self-directed recovery, and link consumers with natural supports. More recently, the states of South Carolina and Arizona developed peer support services that became Medicaid reimbursable. These States have set important precedents for OMHSAS to win approval to bill Medicaid for peer support services in the near future.

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92099/06-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2003 to September 2006  
**Funding:** \$464,184  
**Principal Investigator:** Anthony Speier  
**Award:** Grant  
**Awardee:** Louisiana Dept. of Health & Hospitals, Office of Mental Health  
 P.O. Box 4049  
 Baton Rouge, LA 70821-4049

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The project is in the second year of funding. ■

Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control. For additional information concerning these grants, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in the second year of funding and has made some progress in educating and enhancing the work of Consumer task groups. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92005/01-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2003 to September 2006  
**Funding:** \$595,349  
**Principal Investigator:** David Parrella  
**Award:** Grant  
**Awardee:** Connecticut Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The project is in its second year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 18-P-91538/04-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** Tami Wilson  
**Award:** Grant  
**Awardee:** Tennessee, Department of Finance and Administration  
 Doctor's Bldg, 5th Floor, 729  
 Church St  
 Nashville, TN 37247-0064

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term

illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91563/07-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** Sara Sack  
**Award:** Grant  
**Awardee:** The University of Kansas Center for Research, Inc.  
 Younberg Hall, 2601 Gabriel Parson, KS 67357

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many states have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** The project is in its third year of funding. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91622/03-01  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$725,000  
**Principal Investigator:** Sherry Shuman  
**Award:** Grant  
**Awardee:** West Virginia University Research Corporation on behalf of WVU/ WVUCED  
 955 Hartman Run Road  
 Morgantown, WV 26505-6845

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is in its third year of funding. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 18-P-91662/00  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2001 to September 2004  
**Funding:** \$900,000  
**Principal Investigator:** Susan Cook  
**Award:** Grant  
**Awardee:** Alaska, Department of Administration  
 3601 C Street, Suite 310  
 Anchorage, AK 99503

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term

**Description:** The purpose of the project is to conduct a feasibility study and subsequent implementation plan for the establishment of a savings program for children (i.e., parents) and adults with disabilities who self-direct their own Medicaid-funded, community-based, long-term care services without disqualifying beneficiaries from necessary medical or public benefit programs. The savings could then be used to purchase items that could substantially improve independence and community participation among citizens with disabilities. The project will investigate the opportunities, barriers and parameters associated with the possible creation of a savings program through interviews, focus groups, surveys, and other research. It will determine the number of people in NH who direct their own services, how many of this group would like to participate in a savings program, the barriers to self-direction and strategies for overcoming them, and model development and implementation plan.

**Status:** The project is underway. ■

#### Real Choice: Mental Health Systems Transformation

**Project No:** 11-P-92468/3-01  
**Project Officer:** April Forsythe  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Virginia DMHMRSAS  
 1220 Bank Street, 10th Floor  
 Richmond, VA 23219

**Description:** The Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), with the endorsement of the Virginia Departments of Medical Assistance Services (DMAS) and Rehabilitative Services (DRS) and in partnership with Virginia's Mental Health Planning Council, is seeking \$300,000 to strengthen the capacity of Virginia's mental health services system to provide integrated community services that embody self-determination, recovery and empowerment.

Project goals include:

1. Assuring Virginia's mental health system transformation and restructuring are based on self-determination, recovery, and empowerment;
2. Aligning Virginia's existing Community Mental Health Rehabilitative Services (CMHRS), new Medicaid services, and Department of Rehabilitation Services

(DRS) with the evidence-based practices of Assertive Community Treatment (ACT), Illness Management and Recovery (IM&R), and Supported Employment; and

3. Maximizing opportunities for peer specialists and consumer operated programs to provide Virginia's existing and evolving implementation of evidence-based practices – to include potential new Adult Peer Support Medicaid Services.

Proposed grant activities follow a proven path to adopting and implementing EBPs, consistent with Virginia's successful experience implementing Programs of Assertive Community Treatment (PACT). The project will focus on consensus and partnership-building with multiple stakeholders and constituencies to develop Virginia-specific models of IM&R and SE; regulatory analysis and clear articulation of the DMHMRSAS, DMAS, and DRS funding streams that will support PACT, IM&R, and SE services; provider training, consultation, and technical assistance; and evaluation of their implementation, measurements of fidelity to the EBP models, and consumer outcomes; and finally plans to expand, sustain, and maintain a high level of quality services.

Project activities will result in an increased number of mental health consumers who: assume policy, planning, evaluation, and leadership functions at Community Services Boards (CSBs) and in DMHMRSAS Regional Partnership Planning and Mental Health System Transformation activities; provide DMAS CMHRS services that include relevant components of IMR and SE; and are better able to access recovery-oriented and personalized supports leading to competitive employment and independence. Approximately \$5-\$10 million of existing DMAS CMHRS Medicaid reimbursement will ultimately be redirected to support, by definition, more effective and efficient recovery-oriented community mental health services and supports.

Virginia's proposed infrastructure development, partnering, and training activities were developed collaboratively with consumers and are responsive to numerous recommendations in the President's New Freedom Commission on Mental Health Report and Virginia's One Community, the Olmstead Task Force Report.

**Status:** The project is underway. ■

**Real Choice: Integrating Long-Term Supports**

**Project No:** 11-P-92571/01-01  
**Project Officer:** Kathryn King  
**Period:** September 2004 to September 2007  
**Funding:** \$900,000  
**Principal Investigator:** Joan Senecal  
**Award:** Grant  
**Awardee:** Agency of Human Services Dept. of Aging & Independent Living  
 103 South Main Street  
 Waterbury, VT 05671-2301

**Description:** The goal of this grant is to provide elders with choices in supportive housing by preserving, developing, and enhancing supportive housing projects, establishing medication assistance practices in congregate housing; and planning two PACE sites that will coordinate services with supportive housing.

**Status:** The project is underway. ■

**Real Choice: Integrating Long-Term Supports**

**Project No:** 11-P-92572/06-01  
**Project Officer:** Kathryn King  
**Period:** September 2004 to September 2007  
**Funding:** \$900,000  
**Principal Investigator:** Herb Sanderson  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services  
 329 Donaghey Plaza South, PO Box 1437  
 Little Rock, AR 72203

**Description:** The purpose of the project is to develop infrastructure needs in order to promote enhancements in affordable adult foster care and assisted living, to develop a housing registry, to create universal design products, and to provide financial and developmental tools to promote housing accessibility statewide.

**Status:** The project is underway. ■

**Real Choice: LIFE Accounts Feasibility and Demonstration**

**Project No:** 11-P-92545/05-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$100,000  
**Principal Investigator:** Ruthanne Landsness  
**Award:** Grant  
**Awardee:** Wisconsin Department of Health and Family Services  
 One West Wilson Street, PO Box 7850  
 Madison, WI 53701

**Description:** The purpose of this grant is to perform a feasibility study of developing Living with Independence, Freedom and Equality (LIFE) Account savings programs for Medicaid recipients. This would be an option to allow individuals to accumulate any savings they achieve by self-directing their care. The savings are for the eventual purchase of equipment of home modifications to promote independence. Savings can be enhanced by the person's earnings or by matched contributions from others.

The study would determine the number of individuals who currently are eligible to enroll and the number who would likely enroll. An analysis will be done to identify the barriers that prohibit Medicaid recipients from participating in self-directed care and the LIFE Account program. The grant funding will provide for the exploration of systems and policy issues that will impact the implementation of a LIFE Account program.

**Status:** The project is underway. ■

**Real Choice: LIFE Accts. Feasibility & Demonstration**

**Project No:** 11-P-92489/01-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$99,999  
**Principal Investigator:** Mary Schuhe  
 Tobey Partch-Davies  
 Grant  
**Award:** Grant  
**Awardee:** University of New Hampshire, Office of Sponsored Research  
 Service Building, 51 College Road  
 Durham, NH 03824-3585

illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service, but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist states to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This grant is in its third year of funding. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92029/03-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$513,557  
**Principal Investigator:** Tera Yoder  
**Award:** Grant  
**Awardee:** Virginia Commonwealth University  
 Partnership for People w/  
 Disabilities  
 P.O. Box 980568  
 Richmond, VA 23298-0568

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are a part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently-used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** Grant activities are progressing. Quarterly monitoring calls are being conducted. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92058/01-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$579,178  
**Principal Investigator:** Margaret Chow-Menzer  
**Award:** Grant  
**Awardee:** Massachusetts Dept. of Mental Retardation/Division of Systems Integration  
 500 Harrison Avenue  
 Boston, MA 02118

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is underway. Quarterly monitoring calls are ongoing. ■

**Community-Integrated Personal Assistance Services and Supports**

**Project No:** 11-P-92081/07-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$600,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska, Department of Health and Human Services  
 301 Centennial Mall S, 5th Floor, P.O. Box 95044  
 Lincoln, NE 68509-5026

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are part of the Real Choice Systems Change Grants for Community

Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** This project is underway. Quarterly monitoring calls are ongoing. ■

#### Community-Integrated Personal Assistance Services and Supports

**Project No:** 11-P-92100/06-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$599,763  
**Principal Investigator:** Cindy Kenneally  
**Award:** Grant  
**Awardee:** Texas Department of Human Services  
 P.O. Box 149030 Mailcode W521  
 Austin, TX 78714-9030

**Description:** The Community-Integrated Personal Assistance Services and Supports Grants are part of the Real Choice Systems Change Grants for Community Living. Personal assistance is the most frequently used service that enables people with a disability or long-term illness to live in the community. Many States have taken leadership roles in designing systems that not only offer the basic personal assistance service but also make that service available in a manner that affords consumers maximum control over the selection of individuals working on their behalf and the manner in which services are provided. These particular projects will assist States to improve personal assistance services that are consumer-directed or offer maximum individual control.

**Status:** Implementation activities in progress. Quarterly monitoring calls are ongoing. ■

#### Design of Evaluation Options of the Systems Change Grants

**Project No:** 500-00-0044/03  
**Project Officer:** Susan Radke  
**Period:** September 2002 to July 2005  
**Funding:** \$299,976  
**Principal Investigator:** Edith Walsh  
**Award:** Task Order (RADSTO)  
**Awardee:** Research Triangle Institute, (NC)  
 PO Box 12194, 3040 Cornwallis Road  
 Research Triangle Park, NC 27709-2194

**Description:** The purpose of this task order is to design research study options to evaluate the Systems Change Grants. There are four different types of grants:

- (1) Nursing Facility Transitions Grants,
- (2) Community-Integrated Personal Assistance Services and Supports Grants,
- (3) Real Choice Systems Change Grants, and
- (4) National Technical Assistance Exchange for Community Living Grants.

Most States and Territories received funding from one or more of the four types of grants. The Americans with Disabilities Act (ADA), the Olmstead decision, and the Systems Change Grants apply to all Americans with a disability or long-term illness regardless of age or income. The Federal government assists States and localities who are required to administer their services, programs, and activities “in the most integrated setting appropriate to the needs of qualified individuals with disabilities.” The scope of the ADA and the Olmstead decision are not limited to Medicaid or Medicare beneficiaries.

**Status:** In June 2001, The Research Triangle Institute (RTI) was selected as a primary contractor. RTI reviewed the System Change Grant summaries and developed a policy outcome typology for potential System Change Grant evaluations. CMS used this information to prioritize policy goals and identify potential research projects. CMS amended the Statement of Work (SOW) to have RTI identify only two to three potential projects from the goals that were prioritized, select one project, and implement a study from one of the priority areas. CMS has selected the project to be implemented from one of the priority areas. A no-cost extension to the evaluation is anticipated. The evaluation has been designed to be replicated at a later date. The output of

#### Real Choice: Integrating Long Term Supports

**Project No:** 11-P-92502/3-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September 2004 to September 2007  
**Funding:** \$812,004  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** District of Columbia, Department of Mental Health  
 64 New York Avenue, NE - 4th Floor  
 Washington, DC, DC 20002

**Description:** Washington, DC – The Department of Mental Health and the Department of Human Services/Mental Retardation and Development Disabilities Administration

In the District of Columbia, there are approximately 700 consumers who have been “dually diagnosed” as persons with both “mental illness” and “mental retardation/developmental disabilities”. The following agencies (DMH,MRDDA,MAA) will partner with service provider organizations responsible for housing to remove barriers to accessing housing and increase homeownership for these targeted citizens through an improved infrastructure. Housing partners include: DC Housing Authority, DC Housing Finance Agency, Dept of Housing and Community Development, Fannie Mae and Freddie Mac.

Overall Goals include:

- An integrated and streamlined process for applying for Medicaid-funded, long-term supports and housing choice options.
- A mechanism will be established to pay for transition needs (eg rental deposits, furniture) of individuals moving out of ICF/MR to community housing.
- Development of a process that provides individuals with disabilities access to housing of their choice, to include both individual and collaborative relationship housing options.
- Creation of a Section 1115 Research and Demo Medicaid project to eliminate barriers that prevent individuals sharing a home from pooling long-term supports.
- Development of new infrastructure comprised of DC agencies to implement housing options for persons with disabilities who can receive information and support in the process of purchasing their own home.

- Hire two Housing support Coordinators, One Medicaid Liaison and outside contractor. • Set up a fund for transition supports.

**Status:** The project is underway. ■

#### Real Choice: Integrating Long-Term Supports

**Project No:** 11-P-92512/00-01  
**Project Officer:** Kathryn King  
**Period:** September 2004 to September 2007  
**Funding:** \$828,232  
**Principal Investigator:** Vicki Skryha  
 Gerald Stolp  
**Award:** Grant  
**Awardee:** Oregon, Department of Human Services  
 500 Summer St, NE - E10  
 Salem, OR 97301-1076

**Description:** The goal of this grant is implementing infrastructure improvements to remove barriers that prevent people with physical, developmental, and psychiatric disabilities from residing in the community housing of their choice.

**Status:** The project is underway. ■

#### Real Choice: Integrating Long-Term Supports

**Project No:** 11-P-92519/01-01  
**Project Officer:** Kathryn King  
**Period:** September 2004 to September 2007  
**Funding:** \$899,954  
**Principal Investigator:** Jan Nisbet, Ph.D.  
**Award:** Grant  
**Awardee:** University of New Hampshire  
 10 West Edge Drive, Suite 101  
 Durham, NH 03824-3522

**Description:** The goal of this grant is to improve or create infrastructure to increase access to affordable and accessible housing for older adults with disabilities, especially mental illness and dementia/Alzheimer's disease.

**Status:** The project is underway. ■

**Real Choice: Integrating Long Term Supports**

**Project No:** 11-P-92486/4-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September 2004 to September 2007  
**Funding:** \$720,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** University of Southern Mississippi  
 118 College Drive #5157  
 Hattiesburg, MS 39406

**Description:** Mississippi: Project Bridge – Improving the Access of Medicaid-Eligible Mississippians to Affordable, Accessible Housing with Long-Term Supports

The Institute for Disability Studies at the University of Southern Mississippi will work with the Division of Medicaid and other key stakeholders to develop the state's infrastructure to meet the needs of Medicaid-eligible individuals with disabilities requiring long-term supports who want to live in their community in the housing arrangement of their choice.

Goals include:

- Establishing a statewide Bridge Action Council to guide the development of a comprehensive plan for system change.
- Provide ongoing training and technical assistance to members of Council regarding best practices, community inclusion, quality of life issues, self-determination and person-centered planning, transition, etc.
- Hold Community Forums sponsored by Bridge Action Council.
- Review the Performance of Mississippi's current system in meeting the needs of individuals and consider the development and implementation or enhancement of policies, programs.
- Develop statewide Action Plan and implementing recommendations.
- Piloting the Action Plan by supporting two community-based demo projects that stress innovative community partnerships between housing providers and long-term support providers with significant input by consumers.
- Hiring Housing Support Coordinators who will be located in local Medicaid offices to create an ongoing community forum for planning and coordination between housing providers and long-term support providers and Medicaid individuals with disabilities and their families.
- Implementing the HOYO model to assist individuals in getting long-term support and in living in the housing arrangement of their choice.

**Status:** The project is underway. ■

**Real Choice: Integrating Long Term Supports**

**Project No:** 11-P-92522/4-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September 2004 to September 2007  
**Funding:** \$775,123  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** North Carolina Department of Health and Human Services and the North Carolina Housing Finance Agency have a partnership to facilitate the inclusion of persons with disabilities within Low-Income Housing Tax Credit developments. This partnership with the NCHFA will include working with consumers, housing providers and local service providers to accomplish the following goals:

- Develop processes, procedures, and monitoring mechanisms to operationalize the DHHS and HFA partnership in the LIHTC program, including implementation of a state-funded rental assistance program demonstration. A minimum of 45 individuals will have successfully transitioned from institutional settings to affordable housing in the community.
- Develop positive working relationships between housing providers and local service agencies to reinforce the shared goal of assisting tenants to access and maintain housing.
- Assure access to the array of available community services and long-term supports—both Medicaid and non-Medicaid funded services—which individuals may need to live successfully in the community.
- Maximize this opportunity to expand the housing knowledge of the human service system to improve collaboration with the other components of the housing system to better serve persons with disabilities.
- Training will be provided with written handbooks and resource guides.

**Status:** The project is underway. ■

this project shall be a written report describing designs of research studies that will analyze the impact of the Systems Change Grants on the provision of care in the community. ■

**Expansion of Health Education and Program Services to the Deaf and Hard of Hearing**

**Project No:** 18-P-92325/05-02  
**Project Officer:** Carl Taylor  
**Period:** August 2004 to August 2006  
**Funding:** \$197,932  
**Principal Investigator:** Beth Blacksin  
**Award:** Grant  
**Awardee:** Advocate Health and Hospital Corporation  
 2025 Windsor Drive  
 Oak Brook, IL 60523

**Description:** The objectives of this project are to: (1) implement a self-management program on depression for members of the deaf community; (2) strengthen and broaden

the telepsychiatry network to expand the number of deaf individuals who receive mental health services; (3) develop a video pamphlet on substance abuse; (4) develop web-based, interactive screening tools in American sign language to assess depression, anxiety and risk for cardiovascular disease; and (5) implement a consultative service for physicians of deaf individuals throughout Advocate Health Care's eight hospitals.

**Status:** This grant was funded in FY 2004 and FY 2005, and the project is underway. ■

**Extensive Nursing Training Program**

**Project No:** 18-P-92416/4-01  
**Project Officer:** Renee Mentnech  
**Period:** August 2004 to August 2005  
**Funding:** \$246,829  
**Principal Investigator:** Bettie Johnson  
**Award:** Grant  
**Awardee:** James S. Taylor Memorial Home  
 1015 Magazine Street  
 Louisville, KY 40203

**Description:** The purpose of this grant is to promote activities that improve the hiring and retention of qualified nursing personnel in the James S. Taylor Nursing Facility.

**Status:** The project is underway. ■

**Family-To-Family Health Care Information and Education Centers**

**Project No:** 95-P-92139/00-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$149,991  
**Principal Investigator:** Jayson Smart  
**Award:** Grant  
**Awardee:** Stone Soup Group  
 2401 East 42nd Avenue, Suite 202  
 Anchorage, AL 99508

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the Web site at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are

to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** The project has had several accomplishments in the first year: establishing an Advisory Board of 12 parents and 12 professionals, 50 percent of which represent rural areas in Alaska; collecting, identifying, and evaluating information on available resources; establishing a library for parents and new, innovative partnerships with collaborating organizations. They are working with a consultant to develop a marketing and outreach plan and have begun website design and brochure development. They completed a survey to determine parent information needs and recruited many parent peer volunteers. ■

#### Family-To-Family Health Care Information and Education Centers

**Project No:** 95-P-92108/08-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Lynn Boettcher Fjellanger  
**Award:** Grant  
**Awardee:** South Dakota Parent Connection, Inc.  
 3701 W. 49th Street, Suite 200B  
 Sioux Falls, SD 57103

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health

Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the website at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** During the first year, the grantee has worked on developing a Family to Family Brochure to publicize the program, as well as training programs for parents. "Health Care Resources in South Dakota" and "Navigating the Health Care Maze" are two of the very effective training sessions they have developed. They have launched their website, although more detailed information needs to be added. The Advisory Council for the grant has been established as well. They are planning to train the parent coordinators early in year 2 of the grant. ■

#### Family-To-Family Health Care Information and Education Centers -- Colorado

**Project No:** 95-P-92020/08-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Christy Blakely  
**Award:** Grant  
**Awardee:** Cerebral Palsy of Colorado, Family Voices Colorado  
 2200 South Jasmine Street  
 Denver, CO 80222

**Awardee:** Utah Parent Center  
 2290 East 4500 South #110  
 Salt Lake City, UT 84117-4428

**Description:** This grant will be housed at Utah Family Vocies—Utah Parent Center. Goals include: (1) establishing a successful Statewide Health Care information and education center that builds on the best practices of other centers; (2) promoting the philosophy of individual- and family-directed supports, encouraging the participation of individuals and their family members; (3) increasing services to families through increased access to information regarding health care issues, home and community based programs, benefit programs, and other resources; and (4) building a database of issues and family involvement; creating an infrastructure for collaboration and sustainability by developing new family advocacy and interagency relationships and strengthening ties with others.

A new section of the website will be added and a toll-free line will be established. Materials and training will be offered to interested parties, and a network of family health partners will be developed.

**Status:** The project is underway. ■

#### Real Choice: Family to Family Health Care Information Education Center -- Massachusetts

**Project No:** 11-P-92452/01-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Rich Robison  
 Beth Dworetzky  
 Grant  
**Award:** Federation of Children with Special Needs  
**Awardee:** 1135 Tremont Street  
 Boston, MA 02120

**Description:** This grant, housed at the Federation for Children with Special Needs, will offer health care information and support to families of children with special needs and others, as they negotiate various systems to enable their children to live in the community and be active participants in the decision-making process. The Center will provide training opportunities to parents on advocacy strategies for achieving quality care, technical assistance, and education to families, and offer a clearinghouse for specialized information and support on eligibility, enrollment, benefits, and services. They

will collaborate and coordinate with other organizations to develop and expand resources for parents.

**Status:** The project is underway. ■

#### Real Choice: Integrating Long Term Supports

**Project No:** 11-P-92586/3-01  
**Project Officer:** Mary Pat Farkas  
**Period:** September 2004 to September 2007  
**Funding:** \$893,340  
**Principal Investigator:** Ann Torregrossa  
**Award:** Grant  
**Awardee:** Pennsylvania Office of the Budget  
 4th Floor West Forum Building  
 Harrisburg, PA 17120

**Description:** By means of the Governor's Office of Health Care Reform, this Pennsylvania project will create state and local infrastructures to increase access to and the amount of affordable, accessible housing, and will form systems to help link persons with long-term supports to affordable, accessible housing options. This grant will seek to increase and link consumers with long-term services needs to affordable and accessible public housing, scattered-site rental units and Pennsylvania Housing Finance Agency—finance units.

Additional goals include:

- Eliminate barriers such as reluctance of landlords to rent to this population, bad credit issues, and fragmented and inadequate home modification programs, by testing reforms at two regional demo sites.
- Work with Housing Finance Authority and public housing authority partners to expand supply of affordable and accessible housing and provide a feeder system for those units from our nursing home transition and diversion project.
- Develop an inventory of PA publicly-funded accessible housing.
- Develop a real-time listing of vacant, affordable housing available to housing coordinators, nursing home transition teams, etc.
- Assess needs of present and future accessible and affordable housing stock for persons with long-term care supports to live in the community.
- Develop a strategic plan for the State for the development of affordable, accessible housing and linking mechanisms for the next decade.

**Status:** The project is underway. ■

**Real Choice: Family to Family Health Care Information & Education Center -- West Virginia**

**Project No:** 11-P-92439/03-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Scott Miller  
**Award:** Grant  
**Awardee:** WVPTI, Inc.  
 371 Broadus Avenue  
 Clarksburg, WV 26301

**Description:** This grant will be housed in the People's Advocacy Information and Resource Services (PAIRS) project. It will educate individuals and their families about effective health care options in the community, maximize community-based options for health care for children, promote the philosophy of individual and family directed supports, provide education and training opportunities, and collaborate with other organizations. It will develop a website, a toll-free information and referral line, and a county coordinator's handbook, will hold 15 public forums statewide, and produce evaluation forms. It will also develop an Advisory Committee composed of key individual and organizational stakeholders.

**Status:** The project is underway. ■

**Real Choice: Family to Family Health Care Information and Education Center -- New York**

**Project No:** 11-P-92514/02-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Jan Fitzgerald  
 Rosemary Randazzo  
 Grant  
**Award:** Grant  
**Awardee:** Parent to Parent of New York State, Inc.  
 PO Box 1296 - Franklin County  
 Tupper Lake, NY 12986

**Description:** This grant is housed at Parent-to-Parent of New York State. Goals of the project include: (1) developing a parent network of Health Information Resource Parents volunteers, (2) training these parents and having them offer support to other parents; (3) providing training and technical assistance and support

to 3,000 families to secure health coverage; 4) obtaining the services their children need in order to keep them at home and in their communities; (5) building the leadership and participation skills of families to allow them to become more involved in policy making.

**Status:** The project is underway. ■

**Real Choice: Family to Family Health Care Information and Education Center -- North Carolina**

**Project No:** 11-P-92515/04-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Grace Sisco  
**Award:** Grant  
**Awardee:** Exceptional Children's Assistance Center  
 907 Barra Row Suite 102-103  
 Davidson, NC 28036

**Description:** This project is a collaboration between the Exceptional Children's Assistance Center and the Children and Youth Branch, Women's and Children's Section of the NC Division of Public Health. The project is designed to identify the needs for infrastructure development at the State and local level and provide the training and coordination necessary to develop a full range of services. The project will assess existing resources to determine what training and information need exist, will develop or adapt training materials appropriately, will create and conduct train-the-trainer workshops, and will provide information and training to families, and other organizations and agencies.

**Status:** The project is underway. ■

**Real Choice: Family to Family Health Care Information and Education Center -- Utah**

**Project No:** 11-P-92583/08-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Gina Pola-Money  
**Award:** Grant

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs, and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the website at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have

years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** The grantee has held several training events during the first year of the project. They have trained 12 of 14 Family Coordinators, as well as over 200 parents, providers, and professionals. One of the most unusual training event was for Hispanic/Latino populations. Collaborating with a Spanish-speaking advocacy group, the grantee held a training with UN-type translation facilities, with participants using headphones to hear the translated presentations. The handouts were all translated as well. It was a great success!

The project has also been working to develop professional partnerships during the year, especially with pediatricians. They have written articles for their publication and have designed and produced door-

knockers with F2F information to be distributed to pediatricians' offices to let them know who to call for questions. The grantee has developed and distributed informational brochures as well to a wide variety of audiences. They run a toll-free line to provide information to parents. ■

**Family-To-Family Health Care Information and Education Centers -- Indiana**

**Project No:** 95-P-92093/05-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Rebecca Agness  
**Award:** Grant  
**Awardee:** The Indiana Parent Information Network, Inc.  
 4755 Kingsway Drive, Suite 105  
 Indianapolis, IN 46025

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the Web site at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families

and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** During the first year of the grant, a new website was established. Training sessions were held in four sites across the state. They have a hotline and sent out at least two newsletters this year. A new director has been appointed to bring to fruition many of the plans that were begun in the first year. ■

#### Family-To-Family Health Care Information and Education Centers -- Louisiana

**Project No:** 11-P-92471/06-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Phyllis Landry  
**Award:** Grant  
**Awardee:** Family Voices of Louisiana, Inc.  
 1539 Jackson Avenue, Suite 200  
 New Orleans, LA 70130

**Description:** This project is under the umbrella organization of Family Voices of Louisiana, Inc. The project will provide technical assistance to families in making health care decisions, respond to requests for information and resources, and coordinate with key partners. All information will be developed to meet the cultural and educational needs and other factors for the intended audience. The Center will develop and implement strategies to expand the number of parent volunteers and will increase training and education for volunteers. The project will also develop data collection protocols and databases on health care plans and programs for children with special health care needs, collaborate with partners to secure additional funding, and provide training to parent support groups to assist them in participating with policy makers.

**Status:** The project is underway. ■

#### Family-To-Family Health Care Information and Education Centers -- Maryland

**Project No:** 95-P-92038/03-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Josie Thomas  
**Award:** Grant  
**Awardee:** The Parents Place of Maryland, Inc.  
 7484 Candlewood Road, Suite S  
 Hanover, MD 21076

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs; (b) develop and disseminate needed health care and HCBS information to families and providers; (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs; and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative. In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs, and assist States meet their Healthy People 2010 objectives for community-based services for children with special health care needs.

The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the Web site at: <http://www.healthypeople.gov>.) CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system, and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

reimbursement capability; and (6) establish a Center of Excellence for IMR services that will provide training and consultation to both center and the State to ensure sustainability of collaborative high quality IMR services throughout New Hampshire.

**Status:** The project is underway. ■

#### Real Choice: Family to Family Health Care Information & Education Center -- Arizona

**Project No:** 11-P-92470/09-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Joyce Millard-Hoie  
 Wendy Benz  
 Grant  
**Award:** Raising Special Kids  
**Awardee:** 2400 N. Central Avenue #200  
 Phoenix, AZ 85004

**Description:** This program is directed by Raising Special Kids, Arizona's Family Voices chapter. The project is intended to meet the needs of families for information and training, demonstrate cultural competence, and promote opportunities for improving communication between parents, youth with disabilities, and health professionals. Objectives include health care education and training initiatives to understand systems of care and Medicaid requirements and the knowledge to obtain appropriate and needed services and to provide youth with special health needs and their parents with information, training, and support to develop self-advocacy skills, for understanding legislation and public policy issues and opportunities to participate at all levels of decision-making.

**Status:** The project is underway. ■

#### Real Choice: Family to Family Health Care Information & Education Center -- Kentucky

**Project No:** 11-P-92465/04-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Patty Dempsey  
**Award:** Grant

**Awardee:** The Arc of Kentucky, Inc.  
 833 East Main Street  
 Frankfort, KY 40601

**Description:** This project is housed at the Arc of Kentucky. It will provide technology for on-line access and create a user-friendly network for the timely delivery and collection of information. The Center will have training sessions and attend other meetings to provide training. The trainings will provide opportunities for peer group discussion and interaction. The Center will also provide information and referral to programs and benefits that can help children remain in the community. Advocacy and self-determination training will also be provided. The Center will also collaborate with existing projects.

**Status:** The project is underway. ■

#### Real Choice: Family to Family Health Care Information & Education Center -- New Mexico

**Project No:** 11-P-92507/06-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Sallie Van Curen  
 David Murchio  
 Grant  
**Award:** Parents Reaching Out To Help, Inc.  
**Awardee:** 1920 B Columbia, SE  
 Albuquerque, NM 87106

**Description:** This project intends to build the capacity of families to understand, access, and choose health care services and support for their children with special health care needs through the development and implementation of educational opportunities, educational materials, and the collection, cataloguing, warehousing and dissemination of information on health care topics and issues.

In addition, the project will develop family-to-family networks by assisting families to become mentors and resources to new families entering or those having difficulty navigating the health care system and accessing information and services. They will provide training and support to these new mentors.

**Status:** The project is underway. ■

and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction. For additional information concerning these grants, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov).

**Status:** This project is in its intermediate start-up phase. When speaking with RI at

a Quarterly Call, I mentioned that our reports reflect that all the RI grant money (\$100,000) has been drawn down and/or spent. When Sharon said that was NOT possible, I contacted Melissa Hulbert, my supervisor, to find out who Sharon should contact at the Medicaid State level. RI reported that they are online with their projected timelines. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 11-P-92004/04-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Dee Drake  
**Award:** Grant  
**Awardee:** Alabama Department of Mental Health and Mental Retardation  
 RSA Union Building 100 N. Union St., PO Box 30141  
 Montgomery, AL 36130

**Description:** The Respite for Children, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** The project is in the intermediate start-up phase. In a recent conversation, the grantees felt that they are in line with their projected timelines for accomplishing their

goals. I pointed out that they have used only \$29,052 of their grant money to date. ■

#### Real Choice Systems Grant Change

**Project No:** 11-P-92508/1-01  
**Project Officer:** Maria Reed  
**Period:** September 2004 to September 2007  
**Funding:** \$300,000  
**Principal Investigator:** Albert Maltais  
**Award:** Grant  
**Awardee:** New Hampshire, Department of Health and Human Services,  
 (Pleasant St)  
 105 Pleasant St  
 Concord, NH 03301

**Description:** The New Hampshire Division of Behavioral Health seeks a Real Choice Systems of Change (Mental Health: Systems Transformation) grant to implement the evidence-based practice (EBP) Illness Management and Recovery (IMR) Statewide in order to empower consumers to better manage their mental illness and to reclaim their lives by supporting their pursuit of personal recovery goals. The critical ingredients of IMR are supported by multiple controlled studies, and include psychoeducation, strategies for improving medication adherence, developing a relapse prevention plan, and enhancing skills for coping with persistent symptoms. Implementation analyses of the IMR program and other EBPs, conducted in New Hampshire and across the country, have identified barriers to access to IMR, including: lack of a coherent service structure for IMR; a mismatch between Medicaid reimbursable procedures and some key components of evidence-based IMR interventions; lack of involvement of consumer providers; and need for ongoing mechanisms to ensure access to training and sustaining high-quality services. The proposed grant will be used to address these barriers to IMR in New Hampshire as follows: (1) establish a coherent service structure for delivering and monitoring IMR in every community mental health center/peer support program region (and the two State-operated inpatient facilities) involving trained clinician-consumer IMR service provider pairs at each site, a supervisor, and a State IMR coordinator; (2) provide training at IMR in each CMHC/Peer Support Program region and State; (3) develop recommendations for modifying Medicaid reimbursement guidelines to support provision of IMR services; (4) develop an IMR State Team at the NH DBH level to lead, monitor, and continuously improve the system transformation; (5) develop credentialing procedures and standards to facilitate long-term Medicaid

**Status:** This project had many accomplishments for 2004. The grantee established and broadly advertised a toll-free number; began a major outreach initiative to providers, pediatricians, hospitals, and clinics, and increased parent contacts; developed and distributed e-newsletters to over 14,000 contacts; attended and presented at several health fairs, conferences, etc.; conducted focus groups to determine the information needs of parents; expanded health outreach to Hispanic/Latino population through a Latino Outreach Coordinator; increased focus on other traditionally underserved populations, such as African-Americans; developed and piloted six workshops related to the Health care system; and conducted trainings for community-based staff on cultural competency. ■

#### Family-To-Family Health Care Information and Education Centers -- Montana

**Project No:** 95-P-92063/08-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Dennis Moore  
**Award:** Grant  
**Awardee:** Parents, Let's Unite for Kids  
 4755 Kingway Drive, Suite 105  
 Indianapolis, IN 46205

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special

health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the website at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** This project had many accomplishments in its first year, 2004: creating an inventory of health-related programs offered across Montana; providing extensive training for the Family Support Consultants, who reside across the state and provide assistance to families; utilizing Interactive TV Learning in a series of training opportunities in order to reach rural and remote areas; conducting regular workshops; opening a satellite office in Missoula through a cooperative arrangement with the Community Medical Center, who provided them with space; establishing an Advisory Committee with members throughout the State, including parents and service providers; and completing a survey of families to identify needed information and education. One of the staff members is training others to be family advocates and provide assistance specifically to families of newborns. ■

#### Family-To-Family Health Care Information and Education Centers -- Nevada

**Project No:** 95-P-92112/07-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Marcia O'Malley  
 Cheryl Dinnell  
 Grant  
**Award:** Family TIES of Nevada, Inc., Family Voices of Nevada  
 P.O. Box 50815  
 Sparks, NV 89435-0815

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the website at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** During the first year of the project, the grantee has published two editions of their newsletter with wide distribution, staffed a toll-free information and referral line, created and implemented a new intake form, and begun research for information and resources for the web-based clearinghouse. They are also working on the Family Voices Data Collection implementation project which complements and supports the goals of this project. They are maximizing resources from a variety of sources. ■

#### Family-To-Family Health Care Information and Education Centers -- New Jersey

**Project No:** 95-P-92042/02-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$150,000  
**Principal Investigator:** Diana MTK Autin  
**Award:** Grant  
**Awardee:** Statewide Parent Advocacy Network of New Jersey, Inc. (SPAN)  
 35 Halsey Street  
 Newark, NJ 07120

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative. In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the Web site at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that

grant. This grantee has spent \$35,797 of its grant money, with \$63,602 remaining. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 18-P-92002/03-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Thomas Merrick  
**Award:** Grant  
**Awardee:** MD Dept. of Health and Mental Hygiene Mental Hygiene Administration  
 55 Wade Ave. SGHC Mitchell Building  
 Catonsville, MD 21228

**Description:** The Respite for Children Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is still in its intermediate start-up phase. In a recent phone call, MD felt that they are in line with their projected timeline for accomplishing their goals. I did point out to them that our records show they have only used \$5,754 of their grant. I am looking forward to meeting them at the preconference for Respite grantees. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 18-P-92133/00-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$99,274  
**Principal Investigator:** Lee Girard  
**Award:** Grant  
**Awardee:** Oregon Department of Human Services Seniors and People with Disabilities  
 500 Summer Street, NE, E-02  
 Salem, OR 97301-1073

**Description:** The Respite for Children Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** As Project Officer, I am concerned that to date none of the \$99,274 grant money awarded has been spent. I will address this in my catch-up Quarterly Call. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 11-P-92014/01-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Deborah Florio  
**Award:** Grant  
**Awardee:** Rhode Island, Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** The Respite for Children Grants, part of the Real Choice Systems Change Grants for Community Living, will enable states to conduct feasibility studies

group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in the start-up phase. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Adults

**Project No:** 11-P-92134/02-01  
**Project Officer:** John Kapustka  
**Period:** September 2003 to September 2006  
**Funding:** \$74,285  
**Principal Investigator:** Kathryn Kuhmerker  
**Award:** Grant  
**Awardee:** New York State Department of Health  
 Corning Tower, Empire State Plaza  
 Albany, NY 12237

**Description:** The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in the start-up phase. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 11-P-92128/06-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$75,000  
**Principal Investigator:** David Deere  
**Award:** Grant

**Awardee:** Arkansas DHS/Division of Developmental Disabilities Services/CMS  
 PO Box 1437-Slot S380  
 Little Rock, AR 72203

**Description:** The Respite for Children Grant, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in the intermediate start-up phase. The principal investigator has changed and this has slowed down the progress of the grant. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Children

**Project No:** 11-P-92033/05-01  
**Project Officer:** Tricia Grannell  
**Period:** September 2003 to September 2006  
**Funding:** \$99,399  
**Principal Investigator:** Lori Irish  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health  
 320 South Walnut, PO Box 30479  
 Lansing, MI 48909

**Description:** The Respite for Children Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct feasibility studies and explore development of Medicaid respite projects specifically targeted for caregivers of children. States may examine the feasibility of providing respite for children, as if it were a Medicaid service, to a limited target group (i.e., children with a physical disability, mental illness, developmental disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in its intermediate start-up phase. I met briefly with Lori Irish at the NFI Conference, and Lori feels that they are timely with all aspects of their

advance the goal and vision of the Information and Education Centers grant program.

**Status:** During the first year of the project there were many accomplishments. The grantee conducted focus groups with Spanish-speaking families and evaluated information to determine the best approaches to reach diverse families. It also piloted the comprehensive training workshops and conducted six county-based workshops. It developed a comprehensive training module, individual training components and fact sheets for families on a variety of topics (e.g. EPSDT, FamilyCare). It has involved families on advisory committees throughout the State. It has provided information on the project to governmental agencies, providers, parents, and others. The Center provided in-person peer-to-peer technical assistance to 275 families, presentations to 980 families, and had over 14,070 hits on the website. The grantee also established a program with 85 medical students to participate in a full day workshop and evening with families of children with special health care needs. ■

#### Family-To-Family Health Care Information and Education Centers -- North Dakota

**Project No:** 11-P-92506/08-01  
**Project Officer:** Kathy Rama  
**Period:** September 2004 to September 2007  
**Funding:** \$150,000  
**Principal Investigator:** Donene Feist  
**Award:** Grant  
**Awardee:** Family Voice of North Dakota, Inc.  
 312 2nd Avenue West, PO Box 163  
 Edgeley, ND 58433

**Description:** This Center will operate within Family Voices of North Dakota. It will develop the capacity of provider and consumer knowledge to coordinate and integrate systems as described by six core outcomes for Children with Special Health Care Needs, build existing efforts, and increase coordination between families, communities, and other agencies and organizations. It will strengthen family professional partnerships and create new partners to assure families have access to information and services. It will do this by developing and implementing an information dissemination plan, developing and increasing opportunities for education and training for families and professionals, and collecting and analyzing data related to project activities.

**Status:** The project is underway. ■

#### Family-To-Family Health Care Information and Education Centers -- Wisconsin

**Project No:** 95-P-92056/05-01  
**Project Officer:** Kathy Rama  
**Period:** September 2003 to September 2006  
**Funding:** \$142,972  
**Principal Investigator:** Elizabeth Hecht  
**Award:** Grant  
**Awardee:** Family Voices of Wisconsin  
 1500 Highland Avenue  
 Madison, WI 53705

**Description:** The Family-To-Family Health Care Information and Education Centers Grants, part of the Real Choice Systems Change Grants for Community Living, will support the development of Family-to-Family Health Care Information and Education Centers (Information and Education Centers). Organizations will use these awards to establish Statewide family-run centers that will (a) provide education and training opportunities for families with children with special health care needs, (b) develop and disseminate needed health care and HCBS information to families and providers, (c) collaborate with other Family-to-Family Health Care Information and Education Centers to benefit children with special health care needs, and (d) promote the philosophy of individual and family-directed supports. CMS is collaborating with the Health Resources and Services Administration (HRSA) in this initiative.

In 2001, the HRSA, Maternal and Child Health Bureau, initiated a program to develop the capacities of families with children with special health care needs and assist states meet their Healthy People 2010 objectives for community-based services for children with special health care needs. The HRSA program is also entitled Family-to-Family Health Care Information and Education Centers. (For information on the Healthy People 2010 initiative, please visit the Web site at: <http://www.healthypeople.gov>.)

CMS recognizes the wealth of knowledge that exists among parents who have years of experience with the long-term care system and the potential for this knowledge to be of assistance to both other families and service providers. The goals of this initiative are to increase both access to and choice in HCBS for families who have children with special health care needs. Applicants must demonstrate that the project (a) establishes new capacity, (b) does not duplicate existing work or supplant existing funding, and (c) devotes all funding under the new proposal to endeavors that advance the goal and vision of the Information and Education Centers grant program.

**Status:** During the first year of this project, the grantee initiated an interagency planning group. One of the major tasks of this group was to identify all the providers of information, assistance, and advocacy in the state in order to develop a network which could interact to better provide information to the public. There will be a webpage with all organizations listed and linked and an attempt to develop a mega-database for use by all providers who serve children and adults with disabilities. Good partnerships have developed from this task.

The project delayed the identification and training of community partners to participate in health benefits training due to changes in their partners at DSCHSN. They will develop a 101 curriculum for families on Maximizing Health and Community Based Supports and services for CSHCN.

The grantee is working on developing fact sheets on a variety of topics, which were identified by a wide range of culturally diverse families.

They are also working on sustainability opportunities. Serious efforts have been focused on strategic planning using a logic model. The Advisory Council is very active in this task. ■

#### Impact of Advanced Illness Coordinated Care (AICC) Nurse Practitioner, The

**Project No:** 18-P-91853/03-01  
**Project Officer:** Pamela Kelly  
**Period:** September 2003 to March 2005  
**Funding:** \$298,050  
**Principal Investigator:** Joseph R. McClellan  
**Award:** Grant  
**Awardee:** Hamot Medical Center  
 3330 Peach Street, Suite 211  
 Erie, PA 16508

**Description:** The Advanced Illness Coordinated Care (AICC) demonstration project, utilizing Advanced Illness Nurse Practitioners (AIP), will implement the AICC program for patients diagnosed with advanced cancer, congestive heart failure, and chronic obstructive pulmonary disease at Hamot Medical Center. The primary objectives for the project are to increase documentation of advance directives, decrease intensive care utilization and mortalities, and decrease total health care costs for these patients with end-stage, advanced diagnoses.

**Status:** The project began in September 2003. All hiring, as well as program processes, data collection forms, and database development for the project occurred

in 2004. As of January, 2005 the project is continuing active enrollment. Patient visits, data collection, and patient enrollment are ongoing. They have screened 2,984 potential subjects for eligibility and willingness to enroll in the study. Seventy-nine (79) patients have been enrolled. Sixty-two (62) patients have completed the three-month intervention period. They have re-initiated enrollment at the original second site which was interrupted during a change in administration. Due to the delay in the study implementation caused by administrative turnover at one of the two recruitment sites, they were not able to complete study enrollment in September 2004 as projected. They have requested a no-cost extension of six months, with project completion in September 2005 rather than March 2005. They will continue to enroll patients until February 2005, with visits scheduled for completion in May 2005. Data collection would be completed in June 2005, with data analysis ongoing from June to September 2005. ■

#### Independence Plus Initiative

**Project No:** 18-P-92019/08-01  
**Project Officer:** Anita Yuskasuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$391,137  
**Principal Investigator:** William West  
**Award:** Grant  
**Awardee:** Colorado DHCPF/Program Integrity Quality Improvement  
 1570 Grant Street  
 Denver, CO 80203

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

**Description:** The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in the start-up phase. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Adults

**Project No:** 11-P-92022/01-01  
**Project Officer:** John Kapustka  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant  
**Awardee:** Rhode Island, Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in its start-up phase. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Adults

**Project No:** 11-P-92097/09-01  
**Project Officer:** John Kapustka  
**Period:** September 2003 to September 2006  
**Funding:** \$100,000  
**Principal Investigator:** Jane Laciste  
**Award:** Grant  
**Awardee:** California Department of Mental Health System of Care - Adult Programs  
 1600 9th Street - Room 130  
 Sacramento, CA 95814

**Description:** The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target group (i.e., the elderly; individuals with mental illness, developmental disability, physical disability, etc.). Such projects will be expected to build in elements that are responsive to individual needs and offer the opportunity for consumer direction.

**Status:** This project is in the start-up phase. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Adults

**Project No:** 11-P-92134/02-00  
**Project Officer:** John Kapustka  
**Period:** September 2003 to September 2006  
**Funding:** \$74,285  
**Principal Investigator:** Kathryn Kuhmerker  
**Award:** Grant  
**Awardee:** New York State Department of Health  
 Corning Tower, Empire State Plaza  
 Albany, NY 12237

**Description:** The Respite for Adults Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to conduct studies assessing the feasibility of developing respite projects for caregivers of adults through Medicaid or other funding streams. States may examine the feasibility of providing respite for adults, as if it were a Medicaid service, to a limited target

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Virginia

**Project No:** 18-P-91599/05  
**Project Officer:** Sue Knefley  
**Period:** September 2001 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Diana Thorpe  
**Award:** Grant  
**Awardee:** Virginia, Department of Medical Assistance Services  
 600 East Broad St, Suite 1300  
 Richmond, VA 23219

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in its fourth year of funding. ■

#### Real Choice Systems Change Grant for Community Living - Respite for Adults

**Project No:** 11-P-92018/05-01  
**Project Officer:** John Kapustka  
**Period:** September 2003 to September 2006  
**Funding:** \$73,854  
**Principal Investigator:** Sharon Evanich  
**Award:** Grant  
**Awardee:** Ohio Department of Aging Administrative Division, 50 West Broad Street, 9th Floor Franklin County  
 Columbus, OH 43215

#### Independence Plus Initiative

**Project No:** 18-P-92054/05-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$500,000  
**Principal Investigator:** Dana Charlton  
**Award:** Grant  
**Awardee:** Ohio Dept., of Mental Retardation/ Development Disability  
 35 E. Chestnut Street, 5th Floor  
 Columbia, OH 43215-2541

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is underway. Quarterly monitoring calls are ongoing. ■

#### Independence Plus Initiative

**Project No:** 18-P-92069/00-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$499,643  
**Principal Investigator:** David Rogers  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare, Division of Family & Community Services  
 450 W. State Street, P.O. Box 83720  
 Pocatello, ID 83720-0036

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered

Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** The project is underway. Quarterly monitoring calls are ongoing. ■

#### Independence Plus Initiative

**Project No:** 18-P-92071/06-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$499,889  
**Principal Investigator:** Judy Moore  
**Award:** Grant  
**Awardee:** LA Department of Health and Hospitals  
 446 North 12th Street  
 Baton Rouge, LA 70802

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is underway. Quarterly monitoring calls are ongoing. ■

#### Independence Plus Initiative

**Project No:** 18-P-92088/04-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$432,108  
**Principal Investigator:** Darlene Meador  
**Award:** Grant

**Awardee:** Georgia Department of Human Resources  
Division of MHDDAD, Two Peachtree Street, NW, 22.224  
Atlanta, GA 30303

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is underway. Quarterly monitoring calls are ongoing. ■

#### Independence Plus Initiative

**Project No:** 18-P-92116/05-01  
**Project Officer:** Anita Yuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$478,600  
**Principal Investigator:** Pam Werner  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health  
320 South Walnut, PO Box 30479  
Lansing, MI 48909

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

#### Independence Plus Initiative

**Project No:** 18-P-92119/01-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to September 2006  
**Funding:** \$499,992  
**Principal Investigator:** Darlene O'Connor  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School  
545 Lake Avenue North  
Worcester, MA 01655

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** The project is underway. Quarterly monitoring calls are ongoing. ■

#### Independence Plus Initiative - Big Sky Bonanza

**Project No:** 18-P-92047/08-01  
**Project Officer:** Anita Yuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$499,963  
**Principal Investigator:** Denise C. King  
**Award:** Grant

**Awardee:** Montana Department of Public Health and Human Services  
PO Box 4210  
Helena, MT 59604-4210

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and

**Awardee:** South Carolina, Department of Health and Human Services  
PO Box 8206  
Columbia, SC 29202-8206

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Tennessee

**Project No:** 18-P-91515/04  
**Project Officer:** Kathryn King  
**Period:** September 2001 to September 2005  
**Funding:** \$1,768,604  
**Principal Investigator:** Deborah Wolkhamer  
**Award:** Grant  
**Awardee:** Tennessee, Department of Mental Health and Developmental Disabilities  
Cordell Hull Bldg, 3rd Floor, 425 5th Ave., N  
Nashville, TN 37243

**Description:** The Real Choice or Freedom Initiative grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This project will help the State of Tennessee design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow States to make meaningful changes in the lives of persons with disabilities. They will help the individual state enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in its third year of funding. ■

#### Real Choice Systems Change - Vermont

**Project No:** 18-P-91565/01  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Bard Hill  
**Award:** Grant  
**Awardee:** Vermont, Agency of Human Services  
103 S. Main St  
Waterbury, VT 05671-1601

**Real Choice Systems Change - North Carolina**

**Project No:** 18-P-91661/04  
**Project Officer:** Ronald Hendlar  
**Period:** September 2001 to September 2004  
**Funding:** \$1,600,000  
**Principal Investigator:** Jan Moxley  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** The Real Choice or Freedom Initiative grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help the State of North Carolina to design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow states to make meaningful changes in the lives of persons with disabilities. They will help the individual State enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in the fourth year with an approved no-cost extension. The fourth year budget is \$443,670. The grantee needs to complete work on implementing the Independence Plus Medicaid Waiver, new service worker job categories, Complete public education, and recruitment activities. ■

**Real Choice Systems Change - Oregon**

**Project No:** 18-P-91670/00  
**Project Officer:** Kathryn King  
**Period:** September 2001 to September 2005  
**Funding:** \$2,000,996  
**Principal Investigator:** Karl Reer  
**Award:** Grant

**Awardee:** Oregon, Department of Human Services  
 500 Summer St, NE - E10  
 Salem, OR 97301-1076

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided; and
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities. Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in its third year of funding. ■

**Real Choice Systems Change - South Carolina**

**Project No:** 18-P-91555/04  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Sue Scally  
**Award:** Grant

demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

**Independence Plus Initiative - Florida Freedom Initiative**

**Project No:** 18-P-92126/04-01  
**Project Officer:** Anita Yuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$501,801  
**Principal Investigator:** Karen Huber  
 Renee Whaley  
 Ed Rousseau  
 Grant  
**Awardee:** Florida Department of Children and Families  
 1317 Winewood Boulevard Building 3  
 Tallahassee, FL 32399

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the Federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

**Independence Plus Initiative - Level of Need and Individual Budgeting**

**Project No:** 18-P-92079/01-01  
**Project Officer:** Anita Yuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$175,000  
**Principal Investigator:** Laura Nuss  
**Award:** Grant  
**Awardee:** Connecticut Department of Mental Retardation  
 460 Capitol Ave.  
 Hartford, CT 06016

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

**Independence Plus Initiative - Missouri Partnership for Self-Directed Support**

**Project No:** 18-P-92062/07-01  
**Project Officer:** Anita Yuskas  
**Period:** September 2003 to September 2006  
**Funding:** \$427,461  
**Principal Investigator:** Kay Green  
 Gus Epple  
 Grant  
**Award:** State of Missouri, Department of Mental Health  
 1706 East Elm Street  
 Jefferson City, MO 65102

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus

framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

#### Independence Plus Initiative - Supporting Choice and Control for Maine Adults with Mental Retardation or Autism

**Project No:** 18-P-92066/01-01  
**Project Officer:** Anita Yuskaskas  
**Period:** September 2003 to September 2006  
**Funding:** \$500,000  
**Principal Investigator:** Jane Gallivan  
 David Goddu  
 Vanessa Pelzer Bell  
 Grant  
**Award:** Department of Behavioral and Development Services of Maine  
 State House Station #40 Kennebec County  
 Augusta, ME 04333

**Description:** The Independence Plus Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will assist States in meeting the federal expectations established by CMS for the approval of self-directed program waivers and demonstration projects within the Independence Plus framework. These expectations include: Person-Centered Planning, Individual Budgeting, Self-Directed Supports (including Financial Management Services and Supports Brokerage), and Quality Assurance and Improvement Systems (including the participant protections of emergency back-up and viable incident management systems).

**Status:** This project is in its start-up phase. ■

#### Institute for End of Life Care

**Project No:** 18-P-91855/08-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to June 2005  
**Funding:** \$496,750  
**Principal Investigator:** Bev Sloan  
**Award:** Grant  
**Awardee:** Hospice of Metro Denver  
 425 South Cherry Street, Suite 700  
 Denver, CO 80246-1234

**Description:** Hospice of Metro Denver will be designing and implementing an Institute for End-Of-Life Care, a center for palliative and end-of-life care and education. This center will conduct training to health care professionals and develop palliative care models to effect more positive end-of-life outcomes.

**Status:** The grantee has received a no-cost extension through June 29, 2005. CMS is providing technical assistance to the grantee as issues arise. ■

#### Maintain Independence and Employment Demonstration - District of Columbia

**Project No:** 11-P-91421/03  
**Project Officer:** Shawn Terrell  
**Period:** January 2002 to December 2007  
**Funding:** \$12,599,022  
**Principal Investigator:** Robert Cosby, M.D.  
**Award:** Grant  
**Awardee:** District of Columbia, Department of Health, Medical Assistance Administration  
 Suite 5135, N. Capitol St., NE  
 Washington, DC 20002

**Description:** The Medicaid Infrastructure Grants Program enables States to build needed systems to help people with disabilities purchase health coverage through Medicaid. Grant funds assist employers access this underused pool of workers, conduct outreach to people with disabilities, train staff in new employment possibilities, and improve transportation and other supports for people with disabilities. The goal of this grant is to support people with disabilities in securing and sustaining competitive employment in an integrated setting. The Infrastructure Grants program provides financial assistance to states through a Medicaid buy-in mechanism under the State Medicaid Plan; the ability

information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in the fourth year with an approved no-cost extension. The fourth year budget is \$519,084. The grantee needs to complete work on implementing the monitoring system and advisory council sustainability, continue the Littleton Model Community program, and implement the research plan. ■

#### Real Choice Systems Change - New Jersey

**Project No:** 18-P-91556/02  
**Project Officer:** Kathryn King  
**Period:** September 2001 to December 2005  
**Funding:** \$2,000,000  
**Principal Investigator:** William Ditto  
**Award:** Grant  
**Awardee:** New Jersey, Department of Human Services  
 222 South Warren St, PO Box 700  
 Trenton, NJ 08625-0700

**Description:** The Real Choice or Freedom Initiative grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help the State of New Jersey to design and implement effective and enduring improvements in community long-term support systems; it will help to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow States to make meaningful changes in the lives of persons with disabilities. They will help the individual State enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in its third year of funding. ■

#### Real Choice Systems Change - New Mexico

**Project No:** 18-P-91644/06  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Debbie Armstrong  
**Award:** Grant  
**Awardee:** New Mexico Human Services Department, Medical Assistance Division  
 228 East Palace Avenue, La Villa  
 Revera Bldg., 1st Floor  
 Santa Fe, NM 87501

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to: • Live in the most integrated community setting appropriate to their individual support requirements and their preferences;

- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided; and
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live, and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its second year of funding. ■

visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** The project is progressing with all technical assistance activities supporting the Real Choice Systems Change grantees. ■

#### Real Choice Systems Change - Nebraska

**Project No:** 18-P-91568/07  
**Project Officer:** Jean Close  
**Period:** September 2001 to September 2005  
**Funding:** \$2,000,000  
**Principal Investigator:** Joni Thomas  
**Award:** Grant  
**Awardee:** Nebraska, Department of Health and Human Services  
 301 Centennial Mall S, 5th Floor, P.O. Box 95044  
 Lincoln, NE 68509-5026

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional

information regarding the New Freedom Initiative, please visit the Website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its final year of funding, under a no-cost extension. ■

#### Real Choice Systems Change - New Hampshire

**Project No:** 18-P-91516/01  
**Project Officer:** Ronald Hendler  
**Period:** September 2001 to September 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Susan Fox  
**Award:** Grant  
**Awardee:** New Hampshire, Department of Health and Human Services,  
 (Pleasant St)  
 105 Pleasant St  
 Concord, NH 03301

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional

to purchase Medicaid coverage for people with a severe impairment who do not yet meet the Supplemental Security Income disability test; significant improvements to Medicaid services that support people with disabilities in their competitive employment efforts; and/or service as a regional State-to-State Medicaid Infrastructure Center.

**Status:** The program is operating at full capacity. ■

#### Maintain Independence and Employment Demonstration - Texas

**Project No:** 11-P-91420/06  
**Project Officer:** Shawn Terrell  
**Period:** January 2002 to January 2007  
**Funding:** \$284,253  
**Principal Investigator:** Dena Stoner  
**Award:** Grant  
**Awardee:** Texas, Health and Human Services Commission  
 P.O. Box 13247  
 Austin, TX 78711-3247

**Description:** The Medicaid Infrastructure Grants Program enables States to build needed systems to help people with disabilities purchase health coverage through Medicaid. Grant funds assist employers access this underused pool of workers, conduct outreach to people with disabilities, train staff in new employment possibilities, and improve transportation and other supports for people with disabilities. The goal of this grant is to support people with disabilities in securing and sustaining competitive employment in an integrated setting. The Infrastructure Grants Program provides financial assistance to states through a Medicaid buy-in mechanism under the State Medicaid Plan; the ability to purchase Medicaid coverage for people with a severe impairment who do not yet meet the Supplemental Security Income disability test; significant improvements to Medicaid services that support people with disabilities in their competitive employment efforts; and/or serving as a regional State-to-State Medicaid Infrastructure Center.

**Status:** Demonstration is not currently active. ■

#### Maintain Independence and Employment Demonstration -- Kansas

**Project No:** 11-P-92389/07-01  
**Project Officer:** Shawn Terrell  
**Period:** November 2004 to March 2006  
**Funding:** \$5,000,000  
**Principal Investigator:** Mary Ellen O'Brien Wright  
**Award:** Grant  
**Awardee:** Kansas, Department of Social and Rehabilitation Services  
 915 Harrison St. 6th Floor North  
 Topeka, KS 66612-1570

**Description:** This demonstration will provide State Medicaid and other health and employment support services as wraparound coverage to a targeted 200 people with health insurance through the Kansas high-risk pool, also known as the Kansas Health Insurance Association (KHIA). People in the high-risk pool experience multiple severe conditions for which they have been unable to obtain employer-sponsored coverage or reasonably priced private coverage. They are ineligible for either Medicaid or Medicare and about one-third of participants are employed. The goals of the project are to improve the health and quality of life of individuals in the intervention group and to demonstrate that, compared to a carefully matched control group of 200 individuals also in the pool, they maintain a higher rate of employment and are less likely to become eligible for any form of Social Security disability benefits or other forms of public assistance.

**Status:** Project is in the operational phase. ■

#### Maintain Independence and Employment Demonstration -- Louisiana

**Project No:** 11-P-92390/06-01  
**Project Officer:** Shawn Terrell  
**Period:** November 2004 to March 2006  
**Funding:** \$5,000,000  
**Principal Investigator:** Olivia Dear  
**Award:** Grant  
**Awardee:** Louisiana, Department of Health and Hospitals  
 P.O. Box 91030  
 Baton Rouge, LA 70821-9030

**Description:** This demonstration will provide the full range of Medicaid equivalent services to 400 uninsured

Louisiana working residents who are age 18 through 64, have job-threatening serious mental illness (SMI), and reside in the Metropolitan Baton Rouge area. The demonstration will study whether the provision of Medicaid services alone, or Medicaid services plus the Individual Placement and Support (IPS) model of supported employment contribute to: (1) job tenure; (2) increased earnings; (3) independence from SSDI or SSI; and (4) improved health status and quality of life. The demonstration will have three randomly assigned groups, each with 200 participants: a Treatment as Usual Group (Medicaid); an Enhanced Treatment Group (Medicaid plus IPS), and a Control Group (no project services).

**Status:** Project is in the development phase. ■

#### Maintain Independence and Employment Demonstration -- Minnesota

**Project No:** 11-P-92387/05-01  
**Project Officer:** Shawn Terrell  
**Period:** November 2004 to March 2006  
**Funding:** \$5,000,000  
**Principal Investigator:** MaryAlice Mowry  
**Award:** Grant  
**Awardee:** Minnesota, Department of Human Services  
 Human Services Building, 444 Lafayette Road  
 St. Paul, MN 55155-3849

**Description:** The Department of Human Services is using this demonstration as an opportunity to build on its history of creating public-private partnerships to better serve the needs of Minnesotans coping with mental illness. It serves a targeted 1,500 to 1,800 employed people diagnosed with serious mental illness in Hennepin, Ramsey, and St. Louis Counties. Employment-related services include ongoing contact with a project navigator, a peer support program, and employment counseling. Medical services and employment interventions will be delivered through a network of partnering health plans and community mental health service providers.

**Status:** Program is in the development phase. Principle investigator to be determined. ■

#### Maintain Independence and Employment Demonstration -- Mississippi

**Project No:** 11-P-91175/04  
**Project Officer:** Shawn Terrell  
**Period:** October 2000 to December 2004  
**Funding:** \$500,000  
**Principal Investigator:** Bo Bowen  
**Award:** Grant  
**Awardee:** Mississippi, Office of Governor, Division of Medicaid  
 Robert E. Lee Building, 239 N. Lamar St., Suite 801, Hinds County  
 Jackson, MS 39201

**Description:** This project allows states to assist working individuals by providing necessary benefits and services required for people to manage the progression of their conditions and remain employed. It is a grant program established by the Ticket to Work and Work Incentives Improvement Act of 1999. The goal is to explore if providing health care to people earlier than traditional Medicaid rules allow will lengthen the person's work life and improve their quality of life. Outcomes to be measured include reliance on cash benefits, employment status, changes in health status, and quality of life.

The Mississippi Project uses the grant award, in conjunction with State funds, to cover persons with HIV/AIDS who work or are willing to return to work. Full Medicaid benefits and services, as well as case management, is provided to the demonstration participants to ensure that they have access and coverage for medical, mental, and social support services necessary to maintain employment and their quality of life. The demonstration site is in nine counties in the Mississippi Delta where there is a relatively high rate of HIV/AIDS, and limited health care resources for people with HIV/AIDS.

**Status:** The project is underway. ■

#### Maintain Independence and Employment Demonstration -- Rhode Island

**Project No:** 11-P-91174/01  
**Project Officer:** Shawn Terrell  
**Period:** October 2000 to December 2004  
**Funding:** \$500,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant

visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its final year of funding, under a no-cost extension. ■

#### Real Choice Systems Change - National State-to-State Technical Assistance

**Project No:** 11-P-92574/6-01  
**Project Officer:** Cathy Cope  
**Period:** September 2004 to September 2007  
**Funding:** \$4,000,000  
**Principal Investigator:** Richard Petty  
**Award:** Grant  
**Awardee:** The Institute for Rehabilitation and Research (TIRR)  
 1333 Moursund Avenue  
 Houston, TX 77030

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to: live in the most integrated community setting appropriate to their individual support requirements and their preferences; exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided; and obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic-change grants represent a major initiative to promote the design and delivery of home and community-based services that assist people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** The project is progressing with all technical assistance activities supporting the Real Choice Systems Change grantees. ■

#### Real Choice Systems Change - National State-to-State Technical Assistance Program for Community Living

**Project No:** 11-P-92015/02-01  
**Project Officer:** Cathy Cope  
**Period:** September 2003 to September 2006  
**Funding:** \$4,399,959  
**Principal Investigator:** Donna J. Foster  
**Award:** Grant  
**Awardee:** Rutgers, The State University of New Jersey/CSHP  
 3 Rutgers Plaza, Cook Campus  
 New Brunswick, NJ 08901

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its final year of funding under a no-cost extension. ■

#### Real Choice Systems Change - Mississippi

**Project No:** 18-P-91562/04  
**Project Officer:** Marguerite Schervish  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Matt Armstrong  
**Award:** Grant  
**Awardee:** Mississippi Department of Mental Health  
 1101 Robert E. Lee Bldg.  
 Jackson, MS 39201

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

#### Real Choice Systems Change - Missouri

**Project No:** 18-P-91535/07  
**Project Officer:** Jean Close  
**Period:** September 2001 to September 2005  
**Funding:** \$2,000,000  
**Principal Investigator:** Shirl Taylor  
**Award:** Grant  
**Awardee:** Missouri, Department of Social Services  
 615 Howerton Court, PO Box 6500  
 Jefferson City, MO 65102-6500

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

**Awardee:** Rhode Island, Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** This project allows states to assist working individuals by providing necessary benefits and services required for people to manage the progression of their conditions and remain employed. It is a grant program established by the Ticket-to-Work and Work Incentives Improvement Act of 1999. The goal is to explore whether providing health care to people earlier than traditional Medicaid rules allow will lengthen the person's work life and improve their quality of life. Outcomes to be measured include reliance on cash benefits, employment status, changes in health status, and quality of life.

The Rhode Island Project uses grant funding, in conjunction with State funds, to provide the full Medicaid benefit package, plus extra services such as targeted case management, personal assistance services, pharmaceutical co-payments, and other employment supports to individuals.

**Status:** The Rhode Island project is inactive due to fiscal barriers in securing the non-Federal share of the service costs. ■

#### Money Follows the Person

**Project No:** 11-P-92010/05-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$743,813  
**Principal Investigator:** Thomas Swant  
**Award:** Grant  
**Awardee:** Wisconsin DHFS/Division of Disability and Elder Services  
 One West Wilson St., PO Box 7850  
 Madison, WI 53707-7850

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs

of state long-term support systems so that (a) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing

arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92041/00-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$608,008  
**Principal Investigator:** Nicole Williams  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 P.O. Box 45600  
 Olympia, WA 98503-5503

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable states to develop and implement strategies to reform the financing and service designs

of state long-term support systems so that (a) a coherent package of State plan and home and community based services waiver services is available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92115/05-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$746,650  
**Principal Investigator:** Michael Head  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health  
 320 South Walnut, PO Box 30479  
 Lansing, MI 48909

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based waiver services are available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92023/01-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$750,000  
**Principal Investigator:** David Goddu  
**Award:** Grant  
**Awardee:** Department of Behavioral and Development Services of Maine State House Station #40 Kennebec County Augusta, ME 04333

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92045/00-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$749,999  
**Principal Investigator:** Beth Stamm  
**Award:** Grant  
**Awardee:** Idaho Department of Health and Welfare, Division of Family & Community Services 450 W. State Street, P.O. Box 83720 Pocatello, ID 83720-0036

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92101/06-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$730,422  
**Principal Investigator:** Cindy Kenneally  
**Award:** Grant  
**Awardee:** Texas Department of Human Services P.O. Box 149030 Mailcode W521 Austin, TX 78714-9030

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to follow the person to the most appropriate

implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow states to make meaningful changes in the lives of persons with disabilities. They will help the individual state enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is underway. ■

#### Real Choice Systems Change - Michigan

**Project No:** 18-P-91663/05  
**Project Officer:** Mark Reed  
**Period:** September 2001 to September 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Brenda Fink  
**Award:** Grant  
**Awardee:** Michigan, Department of Community Health 320 South Walnut, PO Box 30479 Lansing, MI 48909

**Description:** The Real Choice or Freedom Initiative Grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help the State of Michigan to design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow States to make meaningful changes in the lives of persons with disabilities. They will help the individual State enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements and

exercise more control over the providers of the services they receive.

**Status:** The project is underway. ■

#### Real Choice Systems Change - Minnesota

**Project No:** 18-P-91547/05  
**Project Officer:** Jean Close  
**Period:** September 2001 to September 2005  
**Funding:** \$2,300,000  
**Principal Investigator:** Karen Langenfeld  
**Award:** Grant  
**Awardee:** Minnesota, Department of Human Services Human Services Building, 444 Lafayette Road St. Paul, MN 55155-3849

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Maryland

**Project No:** 18-P-91593/03  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Mark Leeds  
**Award:** Grant  
**Awardee:** Maryland  
 201 West Preston St  
 Baltimore, MD 21201

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the

systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Massachusetts

**Project No:** 18-P-91632/01-01  
**Project Officer:** Mark Reed  
**Period:** September 2001 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Jay Himmelstein  
**Award:** Grant  
**Awardee:** University of Massachusetts Medical School  
 545 Lake Avenue North  
 Worcester, MA 01655

**Description:** The Real Choice or Freedom Initiative grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help Massachusetts design and

and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92123/03-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$698,113  
**Principal Investigator:** Gregory Howe  
**Award:** Grant  
**Awardee:** Commonwealth of Pennsylvania, Department of Public Welfare  
 P.O. Box 2675  
 Harrisburg, PA 17105

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based services waiver services is available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92044/09-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$749,999  
**Principal Investigator:** Todd Butterworth  
**Award:** Grant  
**Awardee:** Nevada Department of Human Resources  
 505 East King Street  
 Carson City, NV 89701

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice

Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based waiver services are available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

#### Money Follows the Person

**Project No:** 11-P-92077/09-01  
**Project Officer:** Donna Schmidt  
**Period:** September 2003 to September 2006  
**Funding:** \$750,000  
**Principal Investigator:** Carol Freels  
**Award:** Grant  
**Awardee:** California Dept. of Health Services, Office of Long Term Care  
 P.O. Box 942732, MS 0018 Ste.  
 71.6031  
 Sacramento, CA 94234

**Description:** The Money Follows The Person Rebalancing Initiative Grants, part of the Real Choice Systems Change Grants for Community Living, will enable States to develop and implement strategies to reform the financing and service designs of state long-term support systems so that (a) a coherent package of State plan and home- and community-based waiver services are available in a manner that permits funding to follow the person to the most appropriate and preferred setting, and (b) financing arrangements exist that enable transition services for individuals who transition between institution and community settings.

**Status:** This project is in its second year. ■

**National Integrated Network for HIV/AIDS Care**

**Project No:** 11-P-92299/9-02  
**Project Officer:** Jean Close  
**Period:** March 1998 to September 2005  
**Funding:** \$11,834,800  
**Principal Investigator:** Michael Weinstein  
**Award:** Grant  
**Awardee:** AIDS Healthcare Foundation  
 6255 West Sunset Boulevard, 16th Floor  
 Los Angeles, CA 90028

**Description:** Congress has provided funding to the AIDS Healthcare Foundation (AHF) each Fiscal Year since 1998. In the last three years, AHF has focused on outreach and hard-to-reach populations. The Foundation's 2005 grant will be used for the following programs: continued development of a national network of specialized HIV/AIDS-focused clinics in California and Florida; and expansion of the Los Angeles-based HIV testing and prevention program.

**Status:** The AIDS Healthcare Foundation was awarded grant funding every year since 1998. They most recently were awarded grant funding on April 8, 2005. The grant is for the 6 month period of March 31, 2005 through September 30, 2005. ■

**National Pediatric Care Education Initiative**

**Project No:** 18-P-91848/05-01  
**Project Officer:** Melissa Harris  
**Period:** September 2003 to March 2005  
**Funding:** \$347,725  
**Principal Investigator:** Jody Chrastek  
**Award:** Grant  
**Awardee:** Children Health Care, Inc.  
 2425 Chicago Avenue South, Mail Stop 40-300  
 Minneapolis, MN 55404

**Description:** This grant will enable Children's Hospitals and Clinics to collaborate with the National Hospice and Palliative Care Organization in providing pediatric education services to clinicians and other providers and to serve as a model for nationwide education and consultation for providers caring for seriously ill children. **Status:** The grantee has received a no-cost extension through March 29, 2005. CMS is providing technical assistance on grant issues as they arise. ■

**National Technical Assistance Exchange for Community Living - ILRU**

**Project No:** 11-P-91554/06  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2005  
**Funding:** \$4,322,121  
**Principal Investigator:** Richard Petty  
**Award:** Grant  
**Awardee:** Independent Living Research Utilization  
 2323 South Shepherd, Suite 1000  
 Houston, TX 77019

**Description:** This awardee, working jointly with Rutgers Center for State Health Policy, will develop, plan, and implement all technical assistance activities related to the Real Choice Systems Change projects. They will establish a single advisory group to provide feedback and input. They will ensure that people with disabilities and long-term illnesses are meaningfully involved in the activities undertaken as a result of grant funding. They will also facilitate involvement of state agencies, providers, and other public and private partners. Together they will produce a Technical Assistance Integrated Management and Operations plan. They will assist states to address barriers to hiring staff.

**Status:** The project is progressing with all technical assistance activities supporting the Real Choice Systems Change grantees. ■

**National Technical Assistance Exchange for Community Living - Rutgers**

**Project No:** 11-P-91512/02  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2005  
**Funding:** \$4,322,121  
**Principal Investigator:** Susan Reinhard  
**Award:** Grant  
**Awardee:** Rutgers, Center for State Health Policy  
 317 Georges Street, Suite 400  
 New Brunswick, NJ 08901-2008

**Description:** This awardee, working jointly with Independent Living Research Utilization, will develop, plan, and implement all technical assistance activities related to the Real Choice Systems Change projects. They will establish a single advisory group to provide feedback and input. They will ensure that people with

to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its final year of funding, under a no-cost extension. ■

**Real Choice Systems Change - Kentucky**

**Project No:** 18-P-91602/04  
**Project Officer:** Bert Williams  
**Period:** September 2001 to September 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Timothy Hawley  
**Award:** Grant  
**Awardee:** Kentucky, Cabinet for Health Services  
 100 Fair Oaks Lane 4E-B  
 Frankfort, KY 40621

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with

disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

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**Status:** This grant is in a no-cost extension and is making progress toward completing the work. ■

**Real Choice Systems Change - Maine**

**Project No:** 18-P-91540/01  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$2,300,000  
**Principal Investigator:** Christine Zukas-Lessard  
**Award:** Grant  
**Awardee:** Maine, Department of Human Services  
 11 State House Station  
 Augusta, ME 04333

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the

disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in its third year of funding. ■

#### Real Choice Systems Change - Illinois

**Project No:** 18-P-91511/05  
**Project Officer:** Marguerite Schervish  
**Period:** September 2001 to September 2005  
**Funding:** \$800,000  
**Principal Investigator:** Audrey McCrimon  
**Award:** Grant  
**Awardee:** Illinois, Department of Human Services  
 425 S. 4th Street  
 Springfield, IL 62701

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the

systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in its fourth year of funding. The grantee was approved for a 12-month no-cost extension on July 7, 2004. ■

#### Real Choice Systems Change - Iowa

**Project No:** 18-P-91596/07  
**Project Officer:** Jean Close  
**Period:** September 2001 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Lila Starr  
**Award:** Grant  
**Awardee:** Iowa, Department of Human Services  
 Hoover Building, 5th Fl, 1305 E. Walnut St.  
 Des Moines, IA 50319-0114

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers

disabilities and long-term illnesses are meaningfully involved in the activities undertaken as a result of grant funding. They will also facilitate involvement of state agencies, providers, and other public and private partners. Together they will produce a Technical Assistance Integrated Management and Operations plan. They will assist states to address barriers to hiring staff.

**Status:** The project is progressing with all technical assistance activities supporting the Real Choice Systems Change grantees. ■

#### North Penn VNA Children's Clinic

**Project No:** 18-P-92307/3-01  
**Project Officer:** Monica Harris  
**Period:** July 2004 to July 2005  
**Funding:** \$74,049  
**Principal Investigator:** Kathleen Fitzgerald  
**Award:** Grant  
**Awardee:** North Penn Visiting Nurse Association  
 51 Medical Campus Drive  
 Lansdale, PA 19446-1254

**Description:** The purposes of the grant funding was for the expansion of health care services to children (birth to age 21) who are either uninsured or underinsured.

**Status:** The project is underway. On September 1, 2004 the clinic expanded its hours of service from 25 hours to 32 hours weekly. Children can now come to our clinic four days per week. The clinic continues to provide 24 hour/7 day per week telephone coverage as well for families. In addition to the expansion of clinic services, the clinic has arranged for the services of an MSW to be on site one day per week to assist some of our families in applying to and navigating through the MA system. Finally, the clinic staff is working with construction contractors planning the renovation of existing space inside our building to accommodate two more examining rooms. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91528/03-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$270,000  
**Principal Investigator:** Larry Henderson  
**Award:** Grant  
**Awardee:** Independent Resources Inc  
 Two Fox Point Centre, 6 Denny Road Ste 205  
 Wilmington, DE 19809

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants,

part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This project is in its third year of funding. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91582/09-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$337,500  
**Principal Investigator:** Sandy Hobart  
**Award:** Grant  
**Awardee:** Community Resources for Independence  
 980 Hopper Avenue  
 Santa Rosa, CA 95403

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants,

part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and States to support nursing facility transitions.

**Status:** This project is in its third year of funding. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91513/05-01  
**Project Officer:** Ronald Hendler  
**Period:** September 2002 to September 2005  
**Funding:** \$400,000  
**Principal Investigator:** David Hancox  
**Award:** Grant  
**Awardee:** Metropolitan Center for Independent Living  
 1600 University Ave., West, Suite 16  
 St Paul, MN 55104-3834

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help

States transition eligible individuals from nursing facilities to the community through grants to support “Independent Living Partnerships” to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This project is making excellent progress and is completing activities on time. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91551/05  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to March 2005  
**Funding:** \$450,000  
**Principal Investigator:** Kathie Knoble-Ivevson  
**Award:** Grant  
**Awardee:** Great Rivers Independent Living Services, Inc.  
 4328 Norman Coulee Rd  
 Lacrosse, WI 54601

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help states transition eligible individuals

from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** The project is ending in March 2005. There was a three month extension and the final report is being written. We are using the unspent funding for a Statewide conference to keep activities and progress going for Medicaid beneficiaries to live in community with HCBS rather than NF. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91580/06  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2004  
**Funding:** \$308,178  
**Principal Investigator:** Ronald Rocha  
**Award:** Grant  
**Awardee:** ARCIL, Inc.  
 825 E. Rundberg Ln, Suite A-1  
 Austin, TX 78753

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help states transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** The Grant is completed. It consisted of outreach and education activities for raising awareness of HCBS and transitioning options. Several training products and brochures were developed but no Medicaid beneficiaries transitioned out of NFs as part of project. ■

**Awardee:** Guam, Department of Public Health and Social Services  
 PO Box 2816  
 Hagatna, GU 96932

**Description:** The Real Choice or Freedom Initiative Grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help the Trust Territory of Guam to design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow states to make meaningful changes in the lives of persons with disabilities. They will help the individual state enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is in the 4th year with an approved no-cost extension and is now moving forward after a long period of stagnation due to the illness of the former project director. The planned summit meeting is now on schedule and the data collection system is in progress. The spend down is behind due to problems with the Guam Finance Dept. Have been working with them to make progress. ■

#### Real Choice Systems Change - Hawaii

**Project No:** 18-P-91620/09  
**Project Officer:** Patricia Helphenstine  
**Period:** September 2001 to September 2004  
**Funding:** \$1,350,000  
**Principal Investigator:** Susan Chandler  
**Award:** Grant  
**Awardee:** Hawaii, Department of Human Services  
 Queen Liliuokalani Bldg, 1390 Miller St  
 Honolulu, HI 96813

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers

to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is currently operating on a 1-month no-cost extension to run through September 27, 2005. ■

#### Real Choice Systems Change - Idaho

**Project No:** 18-P-91537/00  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2001 to September 2004  
**Funding:** \$1,102,148  
**Principal Investigator:** Beth Stamm  
**Award:** Grant  
**Awardee:** Idaho, Department of Health and Welfare, (State St)  
 450 W. State St, 5th Floor  
 Boise, ID 83720-0036

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Delaware

**Project No:** 18-P-91557/03  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$1,200,000  
**Principal Investigator:** Joseph B. Keyes  
**Award:** Grant  
**Awardee:** Delaware Health and Social Services (New Castle) 1901 North DuPont Highway New Castle, DE 19720

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its fourth year of funding. It is operating under a no-cost extension and is progressing with all activities. ■

#### Real Choice Systems Change - Florida

**Project No:** 18-P-91636/04  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2001 to September 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Lloyd Tribley  
**Award:** Grant  
**Awardee:** Florida, Department of Management Services 4040 Esplanade Way, Suite 152 Tallahassee, FL 32399

**Description:** The Real Choice or Freedom Initiative grants are designed to remove barriers to equality for the 54 million Americans living with disabilities. This particular project will help the State of Florida design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, the projects will allow states to make meaningful changes in the lives of persons with disabilities. They will help the individual state enable people with disabilities to reside in their own homes and participate fully in community life. This will happen by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in its third year of funding. ■

#### Real Choice Systems Change - Guam

**Project No:** 18-P-91629/00  
**Project Officer:** Ronald Hendler  
**Period:** September 2001 to September 2004  
**Funding:** \$673,106  
**Principal Investigator:** Cynthia Naval  
**Award:** Grant

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91626/08-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$400,000  
**Principal Investigator:** Debra Mair  
**Award:** Grant  
**Awardee:** Utah Independent Living Center Inc 3445 South Main Street Salt Lake City, UT 84115

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help states transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This project is in its third year of funding. Because of turnover of staff in CIL, a lot of time is spent in retraining and communication of activities, which slows things down. In rural areas it is more difficult to do a peer mentor because workers are not available and there are distance issues. We have developed a transition manual and will have a Housing website to assist people with finding the available housing. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91637/02-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$400,000  
**Principal Investigator:** Pamela Reid  
**Award:** Grant  
**Awardee:** Resources for Independent Living Inc 126 Franklin St Riverside, NJ 08075

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community through grants

to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This project is in its third year of funding. Plan to ask for no-cost extension. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91650/04  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$400,000  
**Principal Investigator:** Rebecca Ramage-Tuttle  
**Award:** Grant  
**Awardee:** DisABILITY LINK 755 Commerce Dr, Suite 415 Decatur, GA 30030

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help states transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This project is in its third year of funding. No-cost extension was granted and the project will complete in September 2005. 147 beneficiaries have been transitioned out of nursing facilities. The state does have waivers in place and we hope to transfer activities to waivers as a covered service. We plan for the Centers for Independent Living to pick up some of the processes being conducted by the grant. ■

#### Nursing Facility Transitions, Independent Living Partnership

**Project No:** 18-P-91656/04  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2001 to September 2004  
**Funding:** \$450,000  
**Principal Investigator:** Daniel Kessler  
**Award:** Grant

**Awardee:** Mid Alabama Chapter of the Alabama Coalition of Citizens with Disabilities  
206 13th Street South  
Birmingham, AL 35233-1317

**Description:** The Nursing Facility Transition, Independent Living Partnership Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community through grants to support Independent Living Partnerships to selected Independent Living Centers (ILCs). These grants will promote partnerships between ILCs and states to support nursing facility transitions.

**Status:** This grant is in its third year of funding. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91591/01  
**Project Officer:** Bert Williams  
**Period:** September 2001 to September 2004  
**Funding:** \$770,000  
**Principal Investigator:** Margaret Chow-Menzer  
**Award:** Grant  
**Awardee:** Massachusetts, Department of Mental Retardation  
500 Harnson Avenue  
Boston, MA 02118

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in a no-cost extension for one year ending September 30, 2005 and is progressing toward completion of the grant work. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91627/03  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$800,000  
**Principal Investigator:** Rhoda Workman  
**Award:** Grant  
**Awardee:** Maryland, Department of Human Resources  
311 West Saratoga Street  
Baltimore, MD 21201-3521

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. The project will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in its third year of funding. There was a six month no-cost extension granted which finishes March of 2005. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91552/04-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$600,000  
**Principal Investigator:** Kara Lewis  
**Award:** Grant

own homes and participate fully in their communities. The award is one way CMS assists the State with “up-front” expenses such as organizing or supporting a consumer task force or a public-private partnership.

**Status:** This is a standard award to allow the recipient to begin the activities that will lead to later project(s). ■

#### Real Choice Systems Change - Alabama

**Project No:** 18-P-91592/04  
**Project Officer:** Gregg Ukaegbu  
**Period:** September 2001 to September 2004  
**Funding:** \$2,000,000  
**Principal Investigator:** Marilyn Ferguson  
**Award:** Grant  
**Awardee:** Alabama, Medicaid Agency  
1665 University Blvd., P.O. Box 5624  
Birmingham, AL 35294-0022

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This grant is in its third year of funding. ■

#### Real Choice Systems Change - Arkansas

**Project No:** 18-P-91598/06  
**Project Officer:** Cathy Cope  
**Period:** September 2001 to September 2004  
**Funding:** \$1,385,000  
**Principal Investigator:** Debbie Hopkins  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services  
329 Donaghey Plaza South, PO Box 1437  
Little Rock, AR 72203

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that allow people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Real Choice Systems Change**

**Project No:** 18-P-91611/05-01  
**Project Officer:** Barry Levin  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Roland Hornbostel  
**Award:** Grant  
**Awardee:** Ohio, Department of Job and Family Services  
 50 W. Broad St, 9th Floor  
 Columbus, OH 43215

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that assist people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change “Starter Grant”**

**Project No:** 10-P-91385/07  
**Project Officer:** Mary Guy  
**Period:** February 2001 to September 2003  
**Funding:** \$50,000  
**Principal Investigator:** Karl Hockenbarger  
**Award:** Grant  
**Awardee:** Kansas, Department of Social and Rehabilitation Services  
 915 Harrison St. 6th Floor North  
 Topeka, KS 66612-1570

**Description:** This grant helps the State develop plans for improving its long-term support systems for community living; include people with disabilities or long-term illness in the planning processes; and prepare for other forthcoming grant opportunities. This project is one of the initial “Starter Grants” made available to all States and Territories to support programs that enable people with disabilities or long-term illness to reside in their own homes and participate fully in their communities. The award is one way CMS assists the State with “up-front” expenses such as organizing or supporting a consumer task force or a public-private partnership.

**Status:** This is a standard award to allow the recipient to begin the activities that will lead to later project(s). ■

**Real Choice Systems Change “Starter Grant”**

**Project No:** 10-P-91401/09  
**Project Officer:** Mary Guy  
**Period:** February 2001 to December 2003  
**Funding:** \$50,000  
**Principal Investigator:** Adjit Bindra  
**Award:** Grant  
**Awardee:** California, Department of Health Services  
 1501 Capitol Avenue, Suite 71.6086,  
 MS 4000, PO Box 942732  
 Sacramento, CA 94234-7320

**Description:** This grant helps the State develop plans for improving its long-term support systems for community living; include people with disabilities or long-term illness in the planning processes; and prepare for other forthcoming grant opportunities. This project is one of the initial “Starter Grants” made available to all States and Territories to support programs that enable people with disabilities or long-term illness to reside in their

**Awardee:** South Carolina, Department of Health and Human Services  
 PO Box 8206  
 Columbia, SC 29202-8206

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. We are requesting a no-cost extension to September 2006. The piloted process in three offices, which covered 11 counties, is now going statewide. We have instituted a 30-day bed hold under waiver so that if anyone moved out of NH, his bed is held in case he has to go back. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91559/02-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2006  
**Funding:** \$600,000  
**Principal Investigator:** Sharon Briggs  
**Award:** Grant  
**Awardee:** New Jersey, Department of Health and Senior Services Division of Consumer Support, OLTCO, Community Choice Initiative  
 P.O. Box 722  
 Trenton, NJ 08625-0722

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the

community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. Grantee plans to request a no-cost extension to September 2006. Project is progressing well; 500 people identified for transitioning, 94 have been transitioned. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91649/04-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2006  
**Funding:** \$600,000  
**Principal Investigator:** Lynne Perrin  
**Award:** Grant  
**Awardee:** North Carolina Department of Health & Human Services  
 2001 Mail Service Center  
 Raleigh, NC 27699-2515

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their

living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its second year of funding. We will be requesting a no-cost extension due to slow start and desire to expand the program to the whole state. Seventeen individuals transitioned in the first year, thirty-four in the second. We have utilized the Task Force, Consumer Advisory Board, and others to address challenges and barriers and to solve problems, especially in the area of housing. The process is working well. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91575/08-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$600,000  
**Principal Investigator:**  
**Award:** Grant  
**Awardee:** Wyoming, Department of Health  
 6101 N.Yellowstone Road, Room 259B  
 Cheyenne, WY 82002

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its second year of funding. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91544/01  
**Project Officer:** Thomas Shenk  
**Period:** September 2001 to September 2004  
**Funding:** \$800,000  
**Principal Investigator:** Michele Parsons  
**Award:** Grant  
**Awardee:** Connecticut Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services

they receive.

**Status:** The project is complete. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91576/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$600,000  
**Principal Investigator:** Helene Robinson  
**Award:** Grant  
**Awardee:** Louisiana, Department of Health and Hospitals  
 P.O. Box 91030  
 Baton Rouge, LA 70821-9030

#### Real Choice Systems Change

**Project No:** 18-P-91579/04-01  
**Project Officer:** Jean Close  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Betty Knott  
**Award:** Grant  
**Awardee:** Georgia Department of Human Resources  
 Division of MHDDAD, Two Peachtree Street, NW, 22.224  
 Atlanta, GA 30303

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

#### Real Choice Systems Change

**Project No:** 18-P-91587/05-01  
**Project Officer:** Jean Close  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Gail Propsom  
**Award:** Grant  
**Awardee:** Wisconsin Dept. of Health and Family Services/DDES  
 One West Wilson Street P.O. Box 7851  
 Madison, WI 53707-7851

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change**

**Project No:** 18-P-91561/03  
**Project Officer:** Patricia Helphenstine  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Cheryl Martin  
**Award:** Grant  
**Awardee:** Pennsylvania, Department of Public Welfare  
 P.O. Box 2675  
 Harrisburg, PA 17105-2675

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change**

**Project No:** 18-P-91574/09-01  
**Project Officer:** Jean Close  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Judith Wright  
**Award:** Grant  
**Awardee:** Nevada Department of Human Resources  
 505 East King Street  
 Carson City, NV 89701

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;

- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

they receive.

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91583/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$598,444  
**Principal Investigator:** Kris Baldwin  
**Award:** Grant  
**Awardee:** Arkansas, Department of Human Services  
 329 Donaghey Plaza South, PO Box 1437  
 Little Rock, AR 72203

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will

allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91518/00  
**Project Officer:** Thomas Shenk  
**Period:** September 2001 to September 2004  
**Funding:** \$770,000  
**Principal Investigator:** Kristina Smock  
**Award:** Grant  
**Awardee:** Washington, Aging and Adult Services Administration  
 PO Box 45600  
 Olympia, WA 98504-5600

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is complete. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91520/07-01  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$600,000  
**Principal Investigator:** Mary Jo Iwan  
**Award:** Grant  
**Awardee:** Nebraska, Department of Health and Human Services  
 301 Centennial Mall S, 5th Floor, P.O. Box 95044  
 Lincoln, NE 68509-5026

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its second year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91534/03-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$566,772  
**Principal Investigator:** Victor Orija  
**Award:** Grant  
**Awardee:** Delaware Health and Social Services (New Castle)  
 1901 North DuPont Highway  
 New Castle, DE 19720

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91585/00  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$800,000  
**Principal Investigator:** Rita Walker  
**Award:** Grant  
**Awardee:** Alaska, Department of Administration  
 3601 C Street, Suite 310  
 Anchorage, AK 99503

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change**

**Project No:** 18-P-91525/00-01  
**Project Officer:** Jean Close  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Cathy Cochran  
**Award:** Grant  
**Awardee:** Washington Department of Social and Health Services  
 P.O. Box 45600  
 Olympia, WA 98503-5503

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Real Choice Systems Change**

**Project No:** 18-P-91543/06-01  
**Project Officer:** Barry Levin  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Christy Fair  
**Award:** Grant  
**Awardee:** Texas, Health and Human Services Commission  
 P.O. Box 13247  
 Austin, TX 78711-3247

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

#### Real Choice Systems Change

**Project No:** 18-P-91594/01-01  
**Project Officer:** Barry Levin  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Frank Spinelli  
**Award:** Grant  
**Awardee:** Rhode Island Department of Human Services, Center for Adult Health  
 600 New London Ave.  
 Cranston, RI 02920

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that help people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

#### Real Choice Systems Change

**Project No:** 18-P-91609/08  
**Project Officer:** Patricia Helphenstine  
**Period:** September 2002 to September 2005  
**Funding:** \$1,313,996  
**Principal Investigator:** John Zeeck  
**Award:** Grant  
**Awardee:** Montana Department of Public Health and Human Services  
 PO Box 4210  
 Helena, MT 59604-4210

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that help people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is underway and has successfully moved 69 beneficiaries out of nursing facilities. The grantee is trying to amend State waiver so that reimbursement for transitioning can come out of that budget and the process will continue after Grant is completed. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91623/03  
**Project Officer:** Thomas Shenk  
**Period:** September 2001 to September 2004  
**Funding:** \$551,678  
**Principal Investigator:** Julie Shelton  
**Award:** Grant  
**Awardee:** West Virginia, Department of Health and Human Resources, Bureau for Medical Services  
 350 Capitol St, Room 251  
 Charleston, WV 25301-3706

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is complete. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91638/04  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2004  
**Funding:** \$6,272,111  
**Principal Investigator:** Bonnie Hurd  
**Award:** Grant  
**Awardee:** Georgia, Department of Community Health  
 2 Peachtree Street, NW, 37th Floor  
 Atlanta, GA 30303

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** Project completed, awaiting Final Report. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91639/01  
**Project Officer:** Ronald Hendler  
**Period:** September 2001 to September 2004  
**Funding:** \$770,000  
**Principal Investigator:** Todd Ringlestein  
**Award:** Grant  
**Awardee:** New Hampshire, Department of Health and Human Services, (Pleasant St)  
 105 Pleasant St  
 Concord, NH 03301

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change

Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in the fourth year with an approved no-cost extension.

The fourth year budget is \$333,246. The grantee needs to complete work on the housing Access voucher program and implement wrap-around team model. The grantee continues to facilitate transitions and hold a state-wide conference. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91642/01-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$600,000  
**Principal Investigator:** Dianne Kayala  
**Award:** Grant  
**Awardee:** Rhode Island, Department of Human Services, HCQFP, Center for Adult Health  
 600 New London Avenue  
 Cranston, RI 02920

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing

and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91651/08  
**Project Officer:** Thomas Shenk  
**Period:** September 2001 to September 2004  
**Funding:** \$800,000  
**Principal Investigator:** Kristie Braaten  
**Award:** Grant  
**Awardee:** Colorado, Department of Health Care Policy and Financing  
 1570 Sherman Street  
 Denver, CO 80203-1714

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** The project is complete. ■

#### Real Choice Systems Change

**Project No:** 18-P-91664/02  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Betty Rice  
**Award:** Grant  
**Awardee:** New York, Department of Health, DPPG, Office of Medicaid Management  
 1 Commerce Plaza, Room 724  
 Albany, NY 12237

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use, and the manner by which services are provided; and
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systemic change grants represent a major initiative to promote the design and delivery of home and community-based services that help people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. No-cost extension through to September 2006 will be requested. State is large and very cumbersome to maneuver among different agencies to get things done as well as huge geographical differences and housing and

staffing an ongoing issues. It is very slow getting started due to bidding process taking over 6 months and inability to work with usual partners due to terms of Grant. ■

#### Real Choice Systems Change

**Project No:** 18-P-91539/08-01  
**Project Officer:** Jean Close  
**Period:** September 2002 to September 2005  
**Funding:** \$1,385,000  
**Principal Investigator:** Donna Riley  
**Award:** Grant  
**Awardee:** Utah, Department of Human Services  
 120 North 200 West, Suite 319  
 P.O. Box 45500 Salt Lake City,  
 UT 84103

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided;
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the state design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that help people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please

**Real Choice Systems Change**

**Project No:** 18-P-91659/06-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2003 to September 2005  
**Funding:** \$1,385,999  
**Principal Investigator:** Carey Garland  
**Award:** Grant  
**Awardee:** Oklahoma Department of Human Services, Aging Services Division  
 P.O. Box 25352  
 Oklahoma City, OK 73125

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided; and
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that support people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our Web site at [www.cms.hhs.gov](http://www.cms.hhs.gov). For information regarding the New Freedom Initiative, please visit the Web site at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its second year of funding. ■

**Real Choice Systems Change**

**Project No:** 18-P-91621/03  
**Project Officer:** Patricia Helphenstine  
**Period:** September 2002 to September 2005  
**Funding:** \$1,313,996  
**Principal Investigator:** Julie Shelton  
**Award:** Grant  
**Awardee:** West Virginia Department of Health and Human Resources Behavioral & Alternative Health Care Policy  
 State Capitol Complex Building 3, Room 251  
 Charleston, WV 25305

**Description:** The Real Choice Systems Change Grants for Community Living are designed to remove barriers to equality for the 54 million Americans living with disabilities. These grants are intended to foster the systemic changes to enable children and adults of any age who have a disability or long-term illness to:

- Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
- Exercise meaningful choices about their living environments, the providers of services they receive, the types of supports they use and the manner by which services are provided; and
- Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

Each particular project will help the State design and implement effective and enduring improvements in community long-term support systems to enable children and adults of any age who have disabilities or long-term illnesses to live and participate in their communities. As a group, these systems change grants represent a major initiative to promote the design and delivery of home and community-based services that help people with a disability or long-term illness to live and participate in their communities. These grants are a part of the President's New Freedom Initiative.

For additional information concerning the Real Choice Systems Change Grants for Community Living, please visit our website at [www.cms.hhs.gov](http://www.cms.hhs.gov). For additional information regarding the New Freedom Initiative, please visit the website at <http://www.whitehouse.gov/infocus/newfreedom>.

**Status:** This project is in its third year of funding. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91655/05  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$770,000  
**Principal Investigator:** Karen Schunk  
 Sherry Gray  
 Grant  
**Award:** Indiana Division of Disability, Aging and Rehabilitation  
 402 W. Washington St, Room W-451, P.O. Box 7083  
 Indianapolis, IN 46207-7083

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** A no-cost extension was granted, but the grantee cannot move forward with contracts with Independent living centers until States' AAA is approved by new administration (new Governor) and signed. The grantee has only spent a small portion of funds. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91667/05  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$770,000  
**Principal Investigator:** David Verseput  
**Award:** Grant

**Awardee:** Michigan, Department of Community Health  
 320 South Walnut, PO Box 30479  
 Lansing, MI 48909

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** A no-cost extension was granted until March 2005. A total of 200 Medicaid beneficiaries have been transitioned and transitioning service has been added under HCBS waiver. ■

**Nursing Facility Transitions, State Program**

**Project No:** 18-P-91672/05  
**Project Officer:** MaryBeth Ribar  
**Period:** September 2001 to September 2005  
**Funding:** \$800,000  
**Principal Investigator:** Gail Propsom  
**Award:** Grant  
**Awardee:** Department of Health and Family Services, Division of Supportive Living  
 One West Wilson, P.O. Box 785 I  
 Madison, WI 53707-785 I

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing

vouchers or developing other coordinated housing strategies. They will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This grant is in its third year of funding. A no-cost extension was granted to September 2005. ■

#### Nursing Facility Transitions, State Program

**Project No:** 18-P-91569/04-01  
**Project Officer:** Thomas Shenk  
**Period:** September 2002 to September 2005  
**Funding:** \$770,000  
**Principal Investigator:** Mellissa Mauser Galvin  
**Award:** Grant  
**Awardee:** Alabama, Medicaid Agency  
 1665 University Blvd., PO Box 5624  
 Birmingham, AL 35294-0022

**Description:** The Nursing Facility Transition, State Program Grants, part of the Real Choice Systems Change Grants for Community Living, will help States transition eligible individuals from nursing facilities to the community. State program grants can be used for a wide range of activities, e.g., a State may wish to use State program grant funds to develop strategies for linking individuals with disabilities to Section 8 rental housing vouchers or developing other coordinated housing strategies. This project will help individual States enable people with disabilities to reside in their own homes and participate fully in community life by designing and implementing improvements in community long-term support systems in partnership with the disability and aging communities. These systemic changes will allow children and adults with disabilities or long-term illnesses to live in the most integrated setting suited to their needs, exercise meaningful choices about their living arrangements, and exercise more control over the providers of the services they receive.

**Status:** This project is in its third year of funding. ■

#### Nursing Home Transition 2000 Program Grant: Partnership for Community Living

**Project No:** 11-P-91208/04  
**Project Officer:** Thomas Shenk  
**Period:** September 2000 to September 2003  
**Funding:** \$500,000  
**Principal Investigator:** David Rogers  
**Award:** Grant  
**Awardee:** Florida, Agency for Health Care Administration, (Mahan Dr)  
 2727 Mahan Drive  
 Tallahassee, FL 32308

**Description:** This project targets Medicaid eligible individuals residing in nursing facilities, under the age of 55, who have sustained a traumatic brain injury and/or spinal cord injury. The goal is to transition individuals who choose to return to the community from nursing facilities by providing services and supporting unmet needs. Funding will help to expand current infrastructure for community-based supports and services, replicate the project with other disability groups, and sustain transitioned individuals in the community. Transition services include those not currently available, such as start-up costs to secure housing, food, home modifications, and housing workshops and education. The project is a cooperative agreement between Florida, State and local agencies, and private organizations.

**Status:** This effort has now been incorporated into the Real Choice System Change projects that focus on the disabled. ■

#### Nursing Home/Assisted Living Facility Construction

**Project No:** 18-P-92331/8-01  
**Project Officer:** Priya Helwig  
**Period:** August 2004 to February 2006  
**Funding:** \$271,512  
**Principal Investigator:** Tracey Fischer  
**Award:** Grant  
**Awardee:** Cheyenne River Sioux Tribe  
 P.O. Box 590  
 Eagle Butte, SD 57625

**Description:** The purpose of the grant to the Cheyenne River Sioux Tribe (CRST) is to provide support to hire a Nursing Home Administrator. The Nursing Home Administrator will be developing the scope of services

to be provided by CRST once the Nursing Home is built using funding from HUD.

**Status:** The project is underway. ■

#### Outreach and Enrollment Assistance for Children's Health Initiative

**Project No:** 18-P-92417/09-01  
**Project Officer:** Carl Taylor  
**Period:** September 2004 to September 2005  
**Funding:** \$98,732  
**Principal Investigator:** Margo Maida  
**Award:** Grant  
**Awardee:** Community Outreach Services  
 2325 Enborg Lane, #2H220  
 San Jose, CA 95128

**Description:** The goal of this grant is to provide funding assistance to Santa Clara County, California, for its Children's Health Initiative Program. This program provided outreach and enrollment assistance for families with children living in Santa Clara County with family income at or below 300 percent of the Federal Poverty Level.

**Status:** The project is underway. ■

#### Pennsylvania Nursing Home Transition Grant 2000

**Project No:** 11-P-91191/03  
**Project Officer:** Thomas Shenk  
**Period:** September 2000 to September 2003  
**Funding:** \$500,000  
**Principal Investigator:** Dale Laninga  
**Award:** Grant  
**Awardee:** Pennsylvania, Department of Public Welfare  
 P.O. Box 2675  
 Harrisburg, PA 17105-2675

**Description:** This project links the U.S. Department of Health and Human Services to work collaboratively with the States of Pennsylvania to enhance choices available to Medicaid beneficiaries who are currently residing in nursing homes. The goal is to empower consumers, promote consumer choice, and assist people to transition from nursing homes into the community. This project

builds on the existing efforts in Pennsylvania to remove the bias toward the use of nursing facilities in the existing long-term care system. While much work to date has had a pre-admission focus, this project complements current efforts by assisting persons currently in nursing homes to return to the community. Existing service programs and waivers will fund the services needed in the community and the project will pay for certain transitional needs that cannot be paid for with existing funding, such as deposits for housing and utilities or groceries. The State will evaluate the program to assist in the identification of barriers to returning to the community, either perceived or real, and will develop outcome measures so that the program can be evaluated for effectiveness and possibly replicated and/or continued beyond the terms of the Federal grant.

**Status:** This effort has now been incorporated into the Real Choice System Change projects that focus on the disabled. ■

#### Program for All-inclusive Care for Children and Their Families

**Project No:** 95-P-91718/03-02  
**Project Officer:** Melissa Harris  
**Period:** April 2002 to March 2004  
**Funding:** \$1,360,984  
**Principal Investigator:** Ann Armstrong-Dailey  
**Award:** Grant  
**Awardee:** Children's Hospice International  
 901 North Pitt Street, #230  
 Alexandria, VA 22314

**Description:** This grant is being utilized by Children's Hospice International to continue efforts begun in prior years to promote the Program of All-inclusive Care for Children and Their Families. Funds were awarded to the region of New England to develop a mechanism for administering this model, and additional funds will be used for technical assistance conferences and educational and evaluative materials.

**Status:** Grant activity continues on schedule. CMS is providing technical assistance as issues arise. ■