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ALASKA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00186/10	Alaska Denali KidCare 1115	Denali KidCare Demonstration	1115	1	CP	9/24/04	NP	9/29/09	Oct-05	Ongoing
NP	Alaska Non Emergency Transportation 1915b	None Provided	1915B	2	NP	11/18/05	NP	12/31/07	NR	NR
0261.90.R1.03	AK - Older Alaskans	Older Alaskan Waiver	1915C	H	OA	10/15/01	NP	6/30/09	Jan-05	Ongoing
0262.90.R1.03	AK-Adults with Physical Disabilities	Adults with Physical Disabilities	1915C	I	AD	10/15/01	NP	6/30/09	Jan-05	Ongoing
0260.90.R1.04	People with Mental Retardation and DD	Mental Retardation/Developmental Disabilities	1915C	L	MR	10/15/01	NP	6/30/09	Jan-05	Ongoing
0263.90.R1.03	AK - Children with Complex Medical Conditions	Children with Medically Complex Conditions	1915C	N	CM	10/15/01	NP	6/30/09	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

ALABAMA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00196/4	1115 Hurricane Katrina Demonstration	Hurricane Katrina Multi-State section 1115 Demonstration	1115	A	KA	09/22/05	8/24/05	06/30/06	Sep-05	Ongoing
NP	Alabama Family Planning 1115	Plan First (Family Planning)	1115	F	FP	07/01/00	10/1/00	09/30/08	Jan-05	Ongoing
NP	Alabama Patient 1st 1915(b)	Patient 1st	1915B	2	P1	10/02/96	1/1/07	12/31/08	Jan-05	Ongoing
NP	Alabama Patient 1st 1915(b)	Maternity Care Waiver	1915B	2	MC	10/02/96	1/1/07	12/31/08	Jan-05	Ongoing
0068.91.R3.04	AL - Elderly and Disabled Individuals	Elderly & Disabled Waiver	1915C	G	ED	03/09/98	NP	09/30/10	Jan-05	Ongoing
0241.90.R2	AL Independent Living Waiver Program	St.of AL.Independ.Living Waiver	1915C	I	SA	09/24/01	NP	03/31/10	Jan-05	Ongoing
40382.R01.00	Alabama Individuals w/HIV/AIDS & Related Illnesses	HIV/AIDS Waiver	1915C	K	AD	10/01/04	10/1/07	09/30/12	Feb-05	Ongoing
0391.90	AL - Living at Home Waiver for Individuals with Mental Retardation	Living at Home Waiver	1915C	L	LH	05/08/02	NP	09/30/10	Jan-05	Ongoing
0001-90.R4.01	Alabama MR/DD	Mental Retardation Waiver	1915C	L	MR	10/31/01	NP	09/30/09	Jan-05	Ongoing
0407	Alabama Assisted Technology Waiver	Technology Assisted Waiver	1915C	N	TA	02/11/03	NP	02/21/06	Jan-05	Ongoing

NP = Not Provided

ARKANSAS'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00201/6	1115 Hurricane Katrina Demonstration	Arkansas Hurricane Katrina Relief Program	1115	A	B4	9/28/05	NP	6/30/06	Oct-05	Ongoing
11-W-0074/6	Arkansas Family Planning 1115	Family Planning	1115	1	B1	6/18/96	9/1/97	1/31/09	Jan-05	Ongoing
11-W-00115/6	Arkansas ARKidsB	ARKids First-B	1115	1	A9	8/19/97	9/1/97	9/30/08	Jan-05	Ongoing
11-W-00116/6	Arkansas Independent Choices - Cash and Counseling	Independent Choices	1115	1	B2	10/9/98	12/1/01	3/31/08	Jan-05	Ongoing
11-W-00163/6	Arkansas TEFRA	TEFRA	1115	1	B3	10/17/02	1/1/03	12/31/07	Jan-05	Ongoing
AR-01	Arkansas Primary Care Physician Program 1915 (b)	Primary Care Case Management	1915B	2	A1	6/11/93	4/1/05	3/31/07	Jan-05	Ongoing
NP	Arkansas Non Emergency Transportation Waiver 1915(b)	Non-Emergency Transportation	1915B	2	A2	2/19/98	10/1/05	9/30/07	Jan-05	Ongoing
0400.90	AR - Assisted Living	Assisted Living/Living Choices	1915C	G	A8	10/24/02	NP	11/30/10	Jan-05	Ongoing
0195.90.R2.03	AR- Elder Health Choices Program	Elder Choices	1915C	H	A4	9/26/01	NP	9/30/10	Jan-05	Ongoing
WA-AR 0312.90	NP	Alternatives for Adults w/Physical Disabilities	1915C	I	A5	NP	NP	NP	Jan-05	Ongoing
0364.04	AR - Family Friends Respite Waiver 1	Respite Care for Children w/Physical Disabilities	1915C	I	A6	5/17/01	NP	9/30/06	Jan-05	Ongoing
0188.90.R2	AR - Alternative Community Service	Alternative Community Services (DDS)	1915C	L	A3	8/6/02	NP	6/30/09	Jan-05	Ongoing
0365.03	AR - Family Friends Respite Waiver 2	Respite Care for Children w/MR or DD	1915C	L	A7	6/4/01	NP	10/31/06	Jan-05	Ongoing

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ARIZONA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00218/9	1115 Hurricane Katrina Demonstration	Arizona Hurricane Katrina Relief	1115	A	KR	3/6/06	8/24/05	6/30/06	Sep-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Arizona HIFA 1115	1115	1	A1	12/12/01	11/1/01	9/30/11	Jan-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Comprehensive State Health Reform Waivers Under 1115 Authority	1115	1	A1	7/13/82	10/1/82	9/30/11	Jan-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Arizona Health Care Cost Containment System (AHCCCS)	1115	1	A1	7/13/82	10/1/82	9/30/11	Jan-05	Ongoing
11-W-00032/9-17	Arizona Health Care Cost Containment System	Family Planning	1115	1	A1	7/13/82	10/1/82	9/30/11	Jan-05	Ongoing

CALIFORNIA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00210/9	1115 Hurricane Katrina Demonstration	Medicaid and SCHIP Coverage for Evacuees of Hurricane Katrina	1115	A	19	12/7/05	NP	6/30/06	Oct-05	Ongoing
11-W-00129/9	California Family Planning, Access, Care and Treatment (PACT) 1115	Family Planning, Access, Care and Treatment (PACT)	1115	1	01	12/1/99	4/1/05	12/15/08	Jan-05	Ongoing
11-W-00094/9-16	NP	Senior Care Action Network (SCAN)	1115	1	02	NP	NP	NP	Jan-05	Ongoing
11-W-00184/9	California In-Home Supportive Services Plus (IHSS Plus)	IHSS Plus Waiver	1115	1	17	7/31/04	8/1/04	7/30/09	Jan-05	Ongoing
NP	California Children's Services and Sacramento Dental Geographic Managed Care	California Children Services/Dental Managed Care	1915B	2	03	8/13/03	NP	9/30/07	Jan-05	Ongoing
NP	California Health Insuring Organizations (HIOs)	Health Insuring Organizations of California	1915B	2	04	7/10/03	7/11/03	6/30/07	Jan-05	Ongoing
NP	California Solano Partnership Health Plan 1915 (b)	Partnership Health Plan of California	1915B	2	05	5/1/94	NP	2/10/05	Jan-05	Ongoing
NP	California Santa Barbara Health Initiative 1915 (b)	Santa Barbara Health Initiative	1915B	2	06	1/1/87	NP	12/31/06	Jan-05	Ongoing
NP	California Health Plan of San Mateo	Health Plan of San Mateo	1915B	2	07	12/30/87	10/1/06	9/30/08	Jan-05	Ongoing
CA-25.90-R01	California - ICF/DD-CN (Intermediate Care Facility/Developmentally Disabled)	Intermediate Care Facility/Developmentally Disabled-Continuous Nursing	1915B	2	08	8/17/01	8/17/01	9/30/07	Jan-05	Ongoing
CA-17-R03	Specialty Mental Health Service Consolidation - Medi-Cal	Specialty Mental Health	1915B	2	10	11/16/00	11/20/00	3/31/07	Jan-05	Ongoing
CA-18-R03	NP	San Mateo County Mental Health Test	1915B	2	09	NP	NP	NP	Jan-05	Mar-05
0431	CA - Home and Community Based Services Assisted Living Waiver	Assisted Living Pilot Project	1915C	G	18	4/1/05	NP	3/31/08	NR	NR
0141.93.R1.03	Multipurpose Senior Services Program	Multipurpose Senior Services Program	1915C	H	14	2/2/01	NP	6/30/09	Jan-05	Ongoing
0348.9	CA - In Home Medical Care	In-Home Medical Care	1915C	I	13	12/19/03	NP	6/30/08	Jan-05	Ongoing
0139.90.R1	CA - Nursing Facility A/B Waiver	Nursing Facility A/B	1915C	I	15	2/28/02	NP	12/31/06	Jan-05	Ongoing
0384.90.01	CA - Nursing Facility Sub-acute	Nursing Facility Subacute	1915C	I	16	2/28/02	NP	3/31/10	Jan-05	Ongoing
0183.90.R1.01	CA - AIDS Waiver	AIDS Waiver	1915C	K	11	3/7/02	NP	12/31/06	Jan-05	Ongoing
0336.90.07	CA - HCBS Waiver for Persons with Developmental Disabilities	Developmentally Disabled	1915C	L	12	8/1/01	NP	6/30/10	Jan-05	Ongoing

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COLORADO'S 2005 MEDICAID WAIVERS

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NP	Community Mental Health Services Program	Community Mental Health Services Program 1915(b)	1915B	2	MH	3/6/98	3/6/98	6/30/07	Jan-05	Ongoing
0006.R05.00	CO Elderly, Blind and Disabled	HCBS Waiver for Persons who are Elderly, Blind, and Disabled	1915C	G	EB	7/1/85	7/1/08	6/30/13	Jan-05	Ongoing
0417.01	CO - Consumer Directed Care for the Elderly (CDCE)	Consumer Directed Care for the Elderly	1915C	H	CD	10/1/04	NP	9/30/07	NR	NR
4157.90.R2	CO - Children Home & Community Based Services Medicaid Waiver	Children's HCBS Waiver	1915C	I	KB	7/1/03	NP	6/30/08	Jan-05	Ongoing
0288.90.R1.02	CO - Brain Injured	HCBS Waiver for Persons with Brain Injury	1915C	J	BI	7/1/03	NP	6/30/08	Jan-05	Ongoing
0211.91.R2	CO - PLWA	HCBS Waiver for Persons Living with AIDS	1915C	K	PL	1/1/04	NP	12/31/08	Jan-05	Ongoing
4180.90.R1	CO - Children's Extensive Support	Children's Extensive Support Waiver	1915C	L	CE	7/1/04	NP	6/30/09	Jan-05	Ongoing
0305.90.R1	CO - Children's Habilitation Residential Program	Children's Habilitation Residential Program Waiver	1915C	L	CR	7/1/04	NP	6/30/09	Jan-05	Ongoing
0007.91.R4	CO - Developmentally Disabled	Waiver for Persons Developmentally Disabled	1915C	L	DD	7/1/04	NP	6/30/09	Jan-05	Ongoing
0293.90.R1	CO - Support Living Services	Supported Living Services	1915C	L	SL	7/1/04	NP	6/30/09	Jan-05	Ongoing
0268.90.R1.01	CO - Persons with Mental Illness	HCBS Waiver for Persons with Mental Illness	1915C	M	MI	7/1/02	NP	6/30/07	Jan-05	Ongoing

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CONNECTICUT'S 2005 MEDICAID WAIVERS

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NP	Connecticut HUSKY Plan Part A	Husky A (MCO Waiver)	1915B	2	M1	7/20/95	NP	6/30/06	Jan-05	Ongoing
0140.90	NP	HCBS Waiver - Elderly (CHC)	1915C	H	C1	NP	NP	NP	Jan-05	Ongoing
0301	NP	The Connecticut Personal Care Assistance Waiver (PCA)	1915C	I	P1	NP	NP	NP	Jan-05	Ongoing
0302.90.R1	CT ABI	The Connecticut Acquired Brain Injury Waiver (ABI)	1915C	J	A1	1/1/99	1/1/07	12/31/11	Jan-05	Ongoing
0153.90	NP	HCBS Waiver - Developmentally Disabled (DMR)	1915C	L	D1	NP	NP	NP	Jan-05	Sep-05
0437.R01.00	CT Comprehensive Supports	DMR Comprehensive Waiver	1915C	L	D2	10/1/05	10/1/08	9/30/13	Oct-05	Ongoing
40110.91.R3	CT - Katie Beckett MR/DD	HCBS Waiver - Katie Beckett Model	1915C	L	K1	1/1/02	NP	12/31/06	Jan-05	Ongoing
0426-IP	NP	IFS Waiver	1915C	L	I1	NP	NP	NP	Jan-05	Ongoing

NP = Not Provided

DISTRICT OF COLUMBIA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-0026/3	1115 Hurricane Katrina Demonstration	Natural Disaster Evacuee - Child	1115	A	07	9/28/05	NP	6/30/06	Sep-05	Ongoing
11-W-00200/3	1115 Hurricane Katrina Demonstration	Natural Disaster Evacuee	1115	A	08	9/28/05	NP	6/30/06	Sep-05	Ongoing
11-W-00139/3	District of Columbia 1115 for Childless Adults	MA 1115 (50-64) Demo Waiver	1115	1	01	3/7/02	2/1/03	9/30/11	Jan-05	Ongoing
11-W-00131/3	D.C. Program to Enhance Medicaid Access for Low-Income HIV-Infected Individuals	NP	1115	1	06	1/19/01	11/5/04	1/13/10	Jan-05	Ongoing
0334.90	DC - Elderly and Physical Disabilities Waiver	MA 1915(C) EPD Waiver	1915C	G	03	1/4/99	NP	1/1/07	Jan-05	Ongoing
0307.R02.00	District of Columbia MR DD	MA 1915(C) MR/DD Waiver	1915C	L	05	9/1/98	11/20/07	11/19/12	Jan-05	Ongoing
11-W-0021/3	NP	MA 1915(C) Special Needs Waiver	1915C	O	02	NP	NP	NP	Jan-05	Ongoing
P-11-91421/3	NP	MA Ticket to Work Special Needs Demonstration	Other	7	04	NP	NP	NP	Jan-05	Ongoing

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DELAWARE'S 2005 MEDICAID WAIVERS

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NP	1115 Hurricane Katrina Demonstration	NP	1115	A	07	3/6/06	NP	6/30/06	Sep-05	Ongoing
11-W00036/3	Delaware Diamond State Health Plan 1115	Diamond State Health Plan (Managed Care Demonstration Waiver)	1115	1	01	5/17/95	1/1/96	12/31/09	Jan-05	Ongoing
11-W00036/3	Delaware Diamond State Health Plan 1115	Family Planning	1115	F	01	5/17/95	1/1/96	12/31/09	Jan-05	Ongoing
0136.90.R3.02	DE - Waiver for the Elderly and Disabled	HCBS Waiver for Elderly and Disabled	1915C	G	02	7/1/89	NP	6/30/09	Jan-05	Ongoing
0332.91	DE - Assisted Living Waiver	HCBS Waiver for Assisted Living	1915C	G	03	10/1/98	NP	9/30/06	Jan-05	Ongoing
40159.90.R2	DE - Individuals with AIDS and other HIV-Related Diseases	HCBS Waiver for AIDS/HIV Clients	1915C	K	04	1/1/91	NP	6/30/09	Jan-05	Ongoing
0009.90.R4	DE - MR/DD	HCBS Waiver for the Mentally Retarded/Developmentally Disabled	1915C	L	05	7/1/89	NP	6/30/09	Jan-05	Ongoing

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FLORIDA'S 2005 MEDICAID WAIVERS

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11-W-00153/4	NP	Pharmacy Assistance Program (Silver Saver)	Pharm	6	02	NP	NP	NP	Jan-05	Ongoing
11-W-00198/4	1115 Hurricane Katrina Demonstration	Katrina	1115	A	21	9/23/05	8/24/05	6/30/06	Sep-05	Ongoing
11-W-00135/4	Florida Family Planning 1115	Family Planning	1115	F	03	8/23/98	9/1/98	11/30/09	Jan-05	Ongoing
11-W-00117/4	Florida Consumer Directed Care Plus	Consumer Directed Care	1115	1	01	10/9/98	3/1/00	2/28/08	Jan-05	Ongoing
FL01.R04.M05	Florida Managed Care Waiver (Medipass) 1915 (b)	Managed Care	1915B	2	05	1/1/90	NP	9/30/07	Jan-05	Ongoing
NP	NP	Specialized ICF/DD	1915B	2	06	NP	NP	NP	Jan-05	Mar-05
FL-12-R01	Florida Statewide Inpatient Psychiatric Program (SIPP)	Statewide Inpatient Psychiatric Program (SIPP)	1915B	2	18	6/8/01	1/1/02	12/31/07	Jan-05	Ongoing
FL06	Florida Coordinated Non Emergency Transportation 1915(b)	Non-Emergent Transportation	1915B	2	07	6/7/01	12/4/05	12/31/07	Jan-05	Ongoing
0010.R06.00	FL Aged and Disabled Adult	Aged and Disabled Adult	1915C	G	10	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
0280.R03.00	FL Assisted Living for the Elderly	Assisted Living for the Elderly	1915C	G	13	7/1/94	1/1/08	12/31/12	Jan-05	Ongoing
0116.R05.00	FL Channeling for the Frail Elderly	Channeling	1915C	H	11	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
0315.90.04	FL - Nursing Home Diversion	Nursing Home Diversion	1915C	H	12	7/1/98	NP	6/30/06	Jan-05	Ongoing
40166.90.R2	FL - Model Waiver	Model/Children Special Care	1915C	I	19	7/1/91	NP	6/30/10	Jan-05	Ongoing
0342.90	FL - HCB Waiver for TBI & Spinal Cord	Traumatic Brain Injury/Spinal Cord Injury	1915C	J	15	7/1/99	NP	6/30/07	Jan-05	Ongoing
0194.R04.00	FL Project AIDS Care	Project AIDS Care (PAC)	1915C	K	14	1/1/90	1/1/08	12/31/12	Jan-05	Ongoing
0010b.91.R4	FL - Developmental Services HCBS Waiver	Developmental Disabilities (DD)	1915C	L	08	7/1/93	NP	9/28/08	Jan-05	Ongoing
0294.R03.00	FL Family and Supported Living (Tier 4)	Community Supported Living (DD)	1915C	L	09	10/1/95	10/1/08	9/30/13	Jan-05	Ongoing
0392.02	FL - Adult Cystic Fibrosis	Adult Cystic Fibrosis	1915C	L	16	10/1/02	NP	6/30/07	Dec-05	Ongoing
NP	Alzheimer's Medicaid Home and Community Based Waiver Program	Alzheimer's Disease	1915BC	4	20	2/19/04	4/1/05	3/31/07	NR	NR
NP	FL - Comprehensive Adult Day Health Care Program	Adult Day Health Care	1915BC	4	17	3/18/03	4/1/04	10/31/08	NR	NR

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GEORGIA'S 2005 MEDICAID WAIVERS

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11-W-00202/4	1115 Hurricane Katrina Demonstration	Katrina Waiver	1115	A	KW	9/28/05	NP	6/30/06	Sep-05	Ongoing
NP	NP	Capitated Waiver Program Waiver	1915B	2	PR	NP	NP	NP	Jan-05	Ongoing
NP	MH/MR Preadmission Screening and Resident Review (PASRR) Program	NP	1915B	2	NP	4/1/94	11/1/94	10/6/05	NR	NR
NP	Georgia Non Emergency Transportation 1915(b)	NP	1915B	2	NP	9/8/99	NP	12/31/07	NR	NR
0112.R05.02	GA Elderly and Disabled	Home and Community Based Waiver - Community Care Service Waiver (CCSP)	1915C	G	CC	10/1/84	10/1/07	9/30/12	Jan-05	Ongoing
4170.90.R1.01	GA - Independent Care Waiver for Disabled Adults	Home and Community Based Waiver for Disabled Children-Independent Care Waiver Program (ICWP)	1915C	I	IC	4/1/92	NP	3/31/06	Jan-05	Ongoing
0175.R04.01	GA New Options Waivers	Home and Community Based Waiver for Disabled Children-Mental Retardation Waiver Program (MRWP)	1915C	L	MR	4/1/92	10/1/07	9/30/12	Jan-05	Ongoing
0323.90.R1	GA - MR/DD	Home and Community Based Waiver for Disabled Children-Community Habilitation and Support Services (CHSS)	1915C	L	CH	10/1/97	NP	9/30/10	Jan-05	Ongoing
GA.01.R01.00	GA Community Based Alternatives for Youth	NP	1915C	M	NP	9/1/05	9/1/08	8/31/13	NR	NR
4116.R04.00	GA - Home & Community-Based Waiver for Disabled Children	Home and Community Based Waiver for Disabled Children-Georgia Pediatric Program (GAPP) Waiver	1915C	N	PP	4/1/85	4/1/08	3/31/13	Jan-05	Ongoing

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HAWAII'S 2005 MEDICAID WAIVERS

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11-W-00001/9	Hawaii QUEST 1115	Comprehensive State Health Reform Waivers under 1115 Authority Hawaii QUEST	1115	1	H1	7/16/93	9/1/93	1/31/13	Jan-05	Ongoing
14	HI - Residential Alternatives Community Care Program	HCBS Waivers under 1915C Authority Aged and Disabled (RACCP)	1915C	G	H3	8/1/94	NP	7/31/09	Jan-05	Ongoing
0057.90.R3	HI - Nursing Home Without Walls	HCBS Waivers under 1915C Authority Aged and Disabled (NHWW)	1915C	G	H4	10/1/92	NP	9/30/08	Jan-05	Ongoing
0182.90.R3	HI - Home & Community-Based HIV Community Care (HCCP) Waiver Program	HCBS Waivers under 1915C Authority AIDS/ARC (HCCP)	1915C	K	H5	6/1/92	NP	5/31/08	Jan-05	Ongoing
0013.90.R3.03	HI - DD/MR	HCBS Waivers under 1915C Authority MR/DD	1915C	L	H2	7/1/89	NP	6/30/10	Jan-05	Ongoing
495.90	HI - Medically Fragile Community Care Program (MFCCP)	HCBS Waivers under 1915C Authority Medically Fragile Community Care Waiver Program (MFCCP)	1915C	N	H6	3/3/00	NP	2/29/08	Jan-05	Ongoing

NP = Not Provided

IOWA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00189/7	IowaCare 1115	Iowa Care	1115	1	X1	6/30/05	7/1/05	6/30/10	Jul-05	Ongoing
11-W-00189/7	IowaCare 1115	Children's Mental Health Waiver	1115	M	H1	6/30/05	7/1/05	6/30/10	NR	NR
A 71IA	Iowa Plan	Iowa Plan	1915B	2	I1	12/9/98	1/1/99	6/30/07	Jan-05	Ongoing
4155.R05.00	IA - Elderly Waiver	Elderly	1915C	H	C1	8/1/90	8/1/08	7/31/13	Jan-05	Ongoing
4111.91.R4	Iowa Ill and Handicapped	Ill and Handicapped	1915C	I	A1	8/1/92	NP	10/31/12	Jan-05	Ongoing
0345.R02.00	IA HCBS Waiver for Persons w/Physical Disabilities	Physical Disability	1915C	I	P1	8/1/99	8/1/07	7/31/12	Jan-05	Ongoing
0299.90.R01.03	IA - Brain Injury Waiver	Brain Injury	1915C	J	E1	10/1/96	NP	9/30/09	Jan-05	Ongoing
0213.R03.02	Iowa AIDS/HIV	AIDS	1915C	K	B1	7/1/95	10/1/06	6/30/12	Jan-05	Ongoing
0242.90.R02.02	IA - MR Waiver	MR	1915C	L	D1	7/1/99	7/1/06	6/30/09	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

IDAHO'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
21-W-00025/0	1115 Hurricane Katrina Demonstration	Disaster Recovery	1115	A	D1	9/28/05	NP	6/30/06	NR	NR
01.R03.01	Idaho Healthy Connections 1915(b) Waiver	Healthy Connections Waiver	1915B	2	H1	9/17/93	NP	9/30/06	Jan-05	Ongoing
0076A.90.R3A.01	ID - Aged and Disabled	PCS Aged/Disabled Waiver	1915C	G	01	10/1/92	NP	9/30/07	Jan-05	Ongoing
0076A.90.R3A.01	ID - Aged and Disabled	HCBS/PCS Aged/Disabled Waiver	1915C	G	02	10/1/92	NP	9/30/07	Jan-05	Ongoing
40189.90.01	ID - TBI Waiver	TBI	1915C	J	11	10/1/98	NP	9/30/06	Jan-05	Ongoing
40189.90.01	ID - TBI Waiver	HCBS/TBI	1915C	J	12	10/1/98	NP	9/30/06	Jan-05	Ongoing
0076.90.R3B.02	ID - DD Waiver	DD Waiver	1915C	L	03	10/1/92	NP	9/30/07	Jan-05	Ongoing
0076.90.R3B.02	ID - DD Waiver	HCBS/DD Waiver	1915C	L	04	10/1/92	NP	9/30/07	Jan-05	Ongoing
0076.90.R3B.02	ID - DD Waiver	HCBS MR/DD Waiver	1915C	L	13	10/1/92	NP	9/30/07	NR	NR
40187.90.R1	ID	ISSH Waiver	1915C	L	05	7/1/96	NP	6/30/09	Jan-05	Ongoing

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ILLINOIS'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00159/5-0	Illinois KidCare Parent Coverage HIFA	KidCare Expansion (Family Care)	HIFA	5	A2	10/13/02	10/1/02	9/30/07	Jan-05	Ongoing
11W00140/5-0	Prescription Drug Benefit for Illinois' Low Income Seniors 1115	Demonstration Enrollee (SeniorCare)	Pharm	6	A1	1/28/02	6/1/02	NP	Jan-05	Ongoing
11-W-00165/5	Illinois Family Planning 1115	Family Planning Expansion Project	1115	F	A3	6/23/03	4/1/04	3/31/09	Jan-05	Ongoing
0326.R02.00	IL Supportive Living Program	Home and Community Based Service Waiver for Supportive Living Facilities (SLFs)	1915C	G	B5	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0143.90.R3	IL - HCBS Waiver for the Elderly	Home and Community Based Service Waiver for Persons that are Elderly	1915C	H	B2	10/1/89	NP	9/30/09	Jan-05	Ongoing
0142.90.R3	IL - HCBS Waiver for Persons with Physical Disabilities	Home and Community Based Service Waiver for Persons with Disabilities	1915C	I	B1	10/1/89	NP	9/30/09	Jan-05	Ongoing
0329.R03.00	IL HCBS Waiver for Persons w/Brain Injury	Home and Community Based Service Waiver for Persons with Brain Injury	1915C	J	B6	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0202.R03.00	IL HCBS Waiver for Persons w/HIV or AIDS	Home and Community Based Service Waiver for Persons with HIV or AIDS	1915C	K	B3	10/1/90	10/1/08	9/30/13	Jan-05	Ongoing
0350.R02.01	IL Waiver for Adults w/DD	Home and Community Based Service Waiver for Adults with Developmental Disabilities	1915C	L	B7	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0278.R03.00	IL HCBS Waiver for Children that are Medically Fragile, Technology Dependent	Home and Community Based Service Waiver for Children that are Medically Fragile, Technology Dependent	1915C	N	B4	9/1/94	9/1/07	8/31/12	Jan-05	Ongoing

NP = Not Provided

INDIANA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00208/5-01	1115 Hurricane Katrina Demonstration	Katrina Waiver	1115	A	KT	10/21/05	NP	6/30/06	Sep-05	Ongoing
NP	NP	TANF	1915B	2	2A	NP	NP	NP	Jan-05	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	MCHIP	1915B	2	2B	10/1/01	NP	9/30/09	Jan-05	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Aged Dual	1915B	2	2C	10/1/01	NP	9/30/09	Jan-05	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Other 1915C Waiver	1915B	2	2D	10/1/01	NP	9/30/09	Jan-05	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Aged; Blind and Disabled Non Dual	1915B	2	2E	10/1/01	NP	9/30/09	Jan-05	Ongoing
IN-01.R04.M01	Indiana Hoosier Healthwise 1915(b)	Other	1915B	2	2F	10/1/01	NP	9/30/09	Jan-05	Ongoing
0210.90.R2.01	IN Aged and Disabled	Aged and Disabled Waiver	1915C	G	AD	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
0362.90	IN - Assisted Living Waiver	Assisted Living Waiver	1915C	G	AL	7/1/01	NP	6/30/09	Jan-05	Ongoing
40197.R02.00	IN Traumatic Brain Injury	Traumatic Brain Injury Waiver	1915C	J	TB	1/1/00	1/1/08	12/31/12	Jan-05	Ongoing
0378.90	NP	Developmentally Disabled Waiver	1915C	L	DD	NP	NP	NP	Jan-05	Ongoing
0387	NP	Support Services Waiver	1915C	L	SS	NP	NP	NP	Jan-05	Ongoing
40201.01	NP	Serious Emotional Disturbance Waiver	1915C	M	SE	NP	NP	NP	Jan-05	Ongoing
40171.90.R1.03	NP	Medically Fragile Children Waiver	1915C	N	MF	NP	NP	NP	Jan-05	Ongoing
4151.R04.00	IN Autism	Autism Waiver	1915C	P	AU	1/1/90	1/1/08	12/31/13	Jan-05	Ongoing

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NR = Not Reported

KANSAS'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NP	Kansas Managed Care Program 1915(b)	NP	1915B	2	NP	6/24/98	NP	NP	NR	NR
NP	Kansas Children & Family Services Behavioral and Rehabilitative Treatment Services Waiver	NP	1915B	2	NP	5/27/05	6/1/05	5/31/07	NR	NR
0303.R02.02	HCBS for the Frail Elderly	Frail Elderly	1915C	H	FE	1/1/97	7/1/08	12/31/09	Jan-05	Ongoing
0304.90.R1	KS - Physical Disabilities	Physically Disabled	1915C	I	PD	1/1/97	NP	12/31/09	Jan-05	Ongoing
4164.90.R02.02	KS - Head Injury	Head Injury	1915C	J	HI	7/1/86	7/1/06	6/30/09	Jan-05	Ongoing
0224.90.R2	Kansas MR/DD	Developmentally Disabled	1915C	L	DD	7/1/94	NP	6/30/09	Jan-05	Ongoing
0320.90.R02.04	KS - Severe Emotional Disturbance (SED) HCBS Waiver	Severely Emotionally Disabled	1915C	M	SE	10/1/97	7/1/08	9/30/10	Jan-05	Ongoing
4165.R04.00	KS Technology Assisted	Technology Assisted	1915C	N	TA	3/1/94	8/1/08	7/31/13	Jan-05	Ongoing

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NR = Not Reported

KENTUCKY'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NP	Kentucky Health Care Partnership 1115	Kentucky Health Care Partnership 1115	1115	1	MC	12/9/93	11/1/97	10/31/08	Jan-05	Sep-05
NP	Kentucky Non Emergency Medical Transportation Program	Freedom of Choice (Transportation Non-Emergency)	1915B	2	TN	2/1/96	NP	6/30/07	Jan-05	Sep-05
0144.90.R3	KY - H &CB Waiver for Elderly & Disabled Individuals	HCB Waiver	1915C	G	HB	1/1/90	NP	7/20/10	Jan-05	Ongoing
0347	NP	Home Care Waiver	1915C	G	HC	NP	NP	NP	Oct-05	Ongoing
0333.90.01	KY - Brain Injuries Waiver	Brain Injury Waiver	1915C	J	BI	1/1/99	NP	12/31/06	Jan-05	Ongoing
0314.90.R1	KY - Supports for Community Living	SCL (Support for Community Living) Waiver	1915C	L	SC	9/1/97	NP	8/31/10	Jan-05	Ongoing
40146.90.R2.01	KY - Model Waiver II	Model II Waiver	1915C	N	MW	10/1/90	NP	9/30/05	Jan-05	Ongoing

NP = Not Provided

LOUISIANA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00209/6	1115 Hurricane Katrina Demonstration	LA Hurricane Katrina Relief Program	1115	A	KR	11/10/05	NP	6/30/06	Aug-05	Ongoing
WA-LA-02 (FOC)	Louisiana Community Care Statewide 1915(b)	Community Care	1915B	2	CC	6/29/98	NP	2/29/04	Jan-05	Sep-05
0121.R05.02	LA Adult Day Health Care	Adult Day Health Care	1915C	G	01	1/1/93	7/1/07	6/30/12	Jan-05	Ongoing
0257.90.R2.03	LA - Elderly and Disabled Adult Waiver (EDA)	Elderly & Disabled Adult	1915C	G	04	7/1/93	NP	6/30/10	Jan-05	Ongoing
0361.90.01	LA - Children's Choice	Children's Choice	1915C	L	05	2/21/01	NP	6/30/10	Jan-05	Ongoing
0401.R01.06	LA New Opportunities Waiver	NOW	1915C	L	06	4/24/03	7/1/06	6/30/11	Jan-05	Ongoing
0251	NP	Personal Care Attendant (PCA)	1915C	I	03	NP	NP	NP	Jan-05	Jun-05

NP = Not Provided

MASSACHUSETTS'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00224/1	1115 Hurricane Katrina Demonstration	Katrina - Medicaid	1115	A	K	3/6/06	NP	6/30/06	NR	NR
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - IP	1115	1	B	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Commonwealth	1115	1	C	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - HIV	1115	1	D	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Basic	1115	1	E	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Family Assistance	1115	1	F	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - Essential	1115	1	H	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1115 Waiver Expansion - 1902(r)2 Kids	1115	1	I	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	Base MCB	1115	1	M	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 (r) 2 kids	1115	1	1	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 (r) 2 disabled	1115	1	2	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
11-W-00030/1	Massachusetts MassHealth 1115	1902 (r) 2 BCCTP	1115	1	3	4/24/95	7/1/97	6/30/08	Jan-05	Ongoing
0059.90.R3.01	MA - HCBS Waiver for Elders	HCBS - DEA	1915C	H	S	1/1/94	NP	12/31/08	Jan-05	Ongoing
0359.90	MA - TBI	HCBS - TBI	1915C	J	T	7/1/01	NP	6/30/09	Jan-05	Ongoing
0064.92.R4	MA MR - Adult Waiver	HCBS - DMR	1915C	L	R	7/1/84	7/1/07	6/30/12	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

MARYLAND'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00211/3	1115 Hurricane Katrina Demonstration	Hurricane Katrina	1115	A	HK	11/10/05	NP	6/30/06	Sep-05	Ongoing
21-W-00033/3	1115 Hurricane Katrina Demonstration	Hurricane Katrina – SCHIP	1115	A	HS	11/10/05	NP	6/30/06	Sep-05	Ongoing
11-W-00099/3	Maryland Health Choice 1115	Maryland Health Choice 1115	1115	1	HC	6/2/97	NP	6/3/11	Jan-05	Ongoing
11-W-00099/3	Maryland Health Choice 1115	Pharmacy Assistance Program	1115	6	HC	6/2/97	NP	6/3/11	Jan-05	Ongoing
11-W-00099/3	Maryland Health Choice 1115	Family Planning	1115	F	HC	6/2/97	NP	6/3/11	Jan-05	Ongoing
0265.90.R1.05	MD - Waiver for Older Adults	Waiver for Older Adults	1915C	G	OA	7/1/93	NP	6/30/10	Jan-05	Ongoing
0353.90.01	MD - Living at Home: Maryland Community Choices	Living at Home Waiver	1915C	I	HM	4/1/01	NP	8/31/10	Jan-05	Ongoing
40198.02	MD - Waiver for Adults with Traumatic Brain Injury	Waiver for Individuals with Traumatic Brain Injury	1915C	J	TB	3/1/03	NP	2/28/06	Jan-05	Ongoing
0023.R05.00	MD Community Pathways	Community Pathways Waiver	1915C	L	CP	7/1/84	7/1/08	6/30/13	Jan-05	Ongoing
0339.90	MD - Waiver for Children with Autism Spectrum Disorder	Waiver for Children with Autism Spectrum Disorder	1915C	L	AU	7/1/01	NP	9/30/09	Jan-05	Ongoing
40118.R05.00	MD Model Waiver for Fragile Children	Model Waiver for Medically Fragile Children	1915C	N	MW	7/1/85	7/1/08	6/30/13	Jan-05	Ongoing

NP = Not Provided

MAINE'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00158/1	MaineCare for Childless Adults HIFA	MaineCare for Childless Adults	1115	5	11	9/13/02	10/1/01	9/30/10	Jan-05	Ongoing
11W00128/1	Maine - HIV/AIDS	HIV	1115	1	10	2/24/00	7/1/02	6/30/10	Jan-05	Ongoing
0276.RO3.00	ME Elderly and Adults with Disabilities	Disabled and Elderly	1915C	G	20	7/1/94	7/1/08	6/30/13	Jan-05	Ongoing
0127.90.R3.01	ME - CD-PAS Waiver	Physically Disabled	1915C	I	22	7/1/94	NP	6/30/09	Jan-05	Ongoing
0159.90.R3	ME - MR Waiver	MR/DD	1915C	L	21	7/1/95	NP	6/30/10	Jan-05	Ongoing

NP = Not Provided

MICHIGAN'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
21-W-00017-5	Michigan Adult Benefits Waiver HIFA	Michigan Adult Benefits Waiver	HIFA	5	AB	1/16/04	1/16/04	1/31/09	Jan-05	Ongoing
MI-11.R03	Michigan Comprehensive Health Care Program 1915(b)	Michigan Comprehensive Health Care Program	1915B	2	MC	10/10/96	NP	In Review	Jan-05	Ongoing
0233.R03.00	MI Choice	MI Choice (Home and Community Based Care)	1915C	G	HC	4/1/95	10/1/07	9/30/12	Jan-05	Ongoing
0167.90.R3	MI - Habilitation Supports	MI - Habilitation Supports	1915C	L	HS	10/1/90	NP	9/30/10	Jan-05	Ongoing
4119.90.R2.03	MI - Children's HCBS Waiver	MI - Children's HCBS Waiver	1915C	L	CW	10/1/88	NP	4/30/10	Jan-05	Ongoing
0438.R01.00	MI Waiver for Children w/ SED	MI - HCBS Waiver for Seriously Emotionally Disturbed Children	1915C	M	SD	10/1/05	10/1/08	9/30/13	NR	NR
MI-14.R03	Michigan Specialty Services and Supports Waiver Program	Michigan Specialty Services and Supports Waiver Program	1915BC	4	MH	6/26/98	10/1/98	9/30/07	Jan-05	Ongoing

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NR = Not Reported

MINNESOTA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00221/W	1115 Hurricane Katrina Demonstration	Disaster Coverage [MA]	1115	A	D1	3/20/06	NP	6/30/06	Jan-05	Ongoing
11-W-00039/5	Minnesota Prepaid Medical Assistance Project Plus	MinnesotaCare Health Care Reform Waiver	1115	1	B1	4/27/95	7/1/95	6/20/08	Jan-05	Ongoing
MN01	Consolidated Chemical Dependency Treatment Fund (CCDTF)	Consolidated Chemical Dependency Treatment Fund Waiver	1915B	2	F1	1/1/88	1/1/88	3/23/07	Jan-05	Ongoing
11-W-00024-5	NP	Minnesota Senior Health Options and Minnesota Disability Health Options Waiver	1915C	G	M1	NP	NP	NP	Jan-05	Ongoing
0025.91.R4.02	MN - Elderly Waiver	Elderly Waiver	1915C	H	M2	7/22/98	NP	6/30/08	Jan-05	Ongoing
0166.90.R3	MN - Community Alternatives for Disabled Individuals	Community Alternatives for Disabled Individuals Waiver	1915C	I	M3	10/1/90	NP	9/30/10	Jan-05	Ongoing
4128	NP	Community Alternative Care Waiver	1915C	I	H2	NP	NP	NP	Jan-05	Ongoing
4169.90.R1.08	MN - Traumatic Brain Injury (TBI)	Traumatic Brain Injury Waiver	1915C	J	M4	4/1/92	NP	3/31/10	Jan-05	Ongoing
0061	NP	Waiver Program for Persons with Mental Retardation and Related Conditions	1915C	L	H1	NP	NP	NP	Jan-05	Ongoing
NP	Minnesota Senior Care Project	Minnesota Senior Care	1915BC	4	SC	6/30/05	4/1/05	3/31/07	Apr-05	Ongoing

NP = Not Provided

MISSOURI'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00122/7	Missouri Family Planning 1115 Waiver	Family Planning	1115	F	A1	4/29/98	9/1/98	10/15/07	Jan-05	Ongoing
11-W-00122/7	Missouri Managed Care Plus (MC+) 1115	1115 Demonstration Waiver	1115	1	A1	4/29/98	9/1/98	10/15/07	Jan-05	Ongoing
MO03.R03.M03	Missouri Managed Care Plus	1915b Capitated Waiver	1915B	2	B1	10/1/95	7/1/06	3/14/04	Jan-05	Ongoing
0026.90.R4	MO - Aged and Disabled Waiver	Aged & Disabled Waiver	1915C	G	C1	4/22/93	NP	4/21/08	Jan-05	Ongoing
0346.90	MO - Independent Living	Independent Living Waiver	1915C	G	C4	1/1/03	1/1/08	12/31/12	Apr-05	Ongoing
40190.90.R1	MO - Physical Disabilities Waiver	Physical Disabilities Waiver	1915C	I	C7	7/1/98	NP	6/30/11	Jan-05	Ongoing
0197.90.R04.00	MO - AIDS	AIDS Waiver	1915C	K	C2	7/1/89	7/1/07	6/30/12	Jan-05	Ongoing
0404.R01.02	MO - Community Support Waiver	Community Support Waiver	1915C	L	C3	7/1/03	7/1/06	6/30/11	Jan-05	Ongoing
40185.R03.00	MO Children w/DD (MOCDD)	MOCDD (Sarah Lopez Waiver)	1915C	L	C5	10/1/95	10/1/08	9/30/13	Jan-05	Ongoing
0178.R03.01	MO MR/DD Comprehensive	MRDD Waiver	1915C	L	C6	7/1/88	7/1/06	6/30/11	Jan-05	Ongoing

NP = Not Provided

MISSISSIPPI'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00197/4	1115 Hurricane Katrina Demonstration	Katrina Waiver	1115	A	09	9/22/05	NP	6/30/06	Aug-05	Ongoing
11W00157-4	Mississippi Family Planning 1115	Family Planning	1115	F	01	1/31/03	10/1/03	9/29/08	Jan-05	Ongoing
11W00185/4	Healthier Mississippi	Healthier Mississippi	1115	1	02	9/10/04	10/1/04	9/30/09	Jan-05	Ongoing
MS02	Mississippi Non Emergency Transportation 1915 (b)	Non-Emergency Transportation	1915B	2	03	4/11/03	7/1/05	6/30/07	Jan-05	Ongoing
0272.R03.00	MS Elderly and Disabled	Mississippi HCBS Waiver: Aged/Disabled	1915C	G	05	7/1/94	7/1/07	6/30/12	Jan-05	Ongoing
0355.R02.00	MS - Assisted Living	Mississippi HCBS Waiver: Assisted Living for the Elderly	1915C	G	07	10/1/00	10/1/08	9/30/13	Jan-05	Ongoing
0255.R03	MS0255R0300	Mississippi HCBS Waiver: Independent Living	1915C	I	04	1/1/94	7/1/07	6/30/12	Jan-05	Ongoing
0366.90	MS - TBI/SCI	Mississippi HCBS Waiver: TBI	1915C	J	08	7/1/01	NP	6/30/09	Jan-05	Ongoing
0282.R03.00	MS Intellectual Disabilities/DD	Mississippi HCBS Waiver: MR/DD	1915C	L	06	7/1/95	7/1/08	6/30/13	Jan-05	Ongoing

NP = Not Provided

MONTANA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-000225/8	1115 Hurricane Katrina Demonstration	Montana Katrina Relief Program	1115	A	NP	3/20/06	8/24/05	6/30/06	NR	NR
11-W-00181/8	Montana Basic Medicaid for Able Bodied Adults	Basic Medicaid for Able-Bodied Adults	1115	1	MB	1/29/04	2/1/04	1/31/09	Jan-05	Ongoing
NP	Montana Passport to Health 1915(b)	PASSPORT to Health Program	1915B	2	MC	8/31/93	NP	4/1/06	Jan-05	Ongoing
0148.90.R2	MT	Montana HCBS Waiver: EPH (0148)	1915C	G	MD	10/1/89	NP	6/30/06	Jan-05	Ongoing
0208.90.R2	MT	Montana HCBS Waiver: MR/DD (0208)	1915C	L	ME	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
0371.90	MT - Community Supports Waiver	Montana HCBS Waiver: DD Age 18 and Older	1915C	L	MF	9/1/01	NP	6/30/09	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

NORTH CAROLINA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00217/4	1115 Hurricane Katrina Demonstration	Hurricane Katrina Relief- Evacuee Origin Alabama	1115	A	AL	2/17/06	8/24/05	6/30/06	Aug-05	Ongoing
11-W-00217/4	1115 Hurricane Katrina Demonstration	Hurricane Katrina Relief- Evacuee Origin Louisiana	1115	A	LA	2/17/06	8/24/05	6/30/06	Jan-05	Ongoing
11-W-00217/4	1115 Hurricane Katrina Demonstration	Hurricane Katrina Relief- Evacuee Origin Mississippi	1115	A	MS	2/17/06	8/24/05	6/30/06	Aug-05	Ongoing
11-W-00182/4	North Carolina Family Planning 1115	Family Planning	1115	F	FP	11/5/04	10/1/05	9/30/10	Oct-05	Ongoing
0423-IP.01	North Carolina - Piedmont Behavioral Health Care	Piedmont Cardinal Health Plan	1915B	2	P2	10/6/04	4/1/05	3/31/07	Apr-05	Ongoing
0132.R05.00	NC - Community Alternatives Program for Disabled Adults (CAP/DA)	CAP Disabled Adults	1915C	G	DA	10/1/82	10/1/08	9/30/13	Jan-05	Ongoing
0412-IP.01	NC - CAP Choice	CAP Choice	1915C	G	CH	1/1/04	4/1/08	3/31/13	Feb-05	Ongoing
0289.90.R1	NC - Community Alternatives Program	CAP AIDS	1915C	K	AI	10/1/95	10/1/03	9/30/08	Jan-05	Ongoing
0151.90.R2.02	NC - MR/DD	CAP Mental Retardation / Developmental Disabilities	1915C	L	MR	7/1/90	NP	3/31/06	Jan-05	Ongoing
4141.90.R3	NC - Community Alternatives Program for Children	CAP Children	1915C	N	CC	7/1/95	7/1/05	6/30/10	Jan-05	Ongoing
NC02.000	NC - Managed Behavioral Health Care Waiver	Piedmont Innovations	1915BC	4	P1	4/1/04	4/1/05	3/31/07	Apr-05	Ongoing

NP = Not Provided

NORTH DAKOTA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NP	1115 Hurricane Katrina Demonstration	NP	1115	A	NP	3/6/06	NP	6/30/06	NR	NR
0054.90.R3	ND	HCBC - Aged / Disabled Waiver	1915C	G	91	10/1/91	NP	9/30/06	Jan-05	Ongoing
0273.90.R1	ND	HCBC - Traumatic Brain Injury Waiver	1915C	J	93	4/1/94	4/1/07	3/31/12	Jan-05	Ongoing
0337.90.R4	ND - MR/DD	HCBC Waiver	1915C	L	90	4/1/94	NP	3/31/09	Jan-05	Ongoing

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NEBRASKA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NE03.R04	Health Connection MH/SA Waiver	Nebraska Health Connection	1915B	2	01	7/1/95	7/1/95	6/30/07	Jan-05	Ongoing
0187.90.R2	NE - Aged and Disabled Adults and Children	Aged and Disabled Waiver	1915C	G	02	8/1/91	NP	7/31/06	Jan-05	Ongoing
40199.R02.00	NE TBI	Traumatic Brain Injury Waiver	1915C	J	08	5/1/00	10/1/08	9/30/13	Jan-05	Ongoing
0396	NP	Waiver for Adults with Developmental Disabilities - Comprehensive	1915C	L	03	NP	NP	NP	Jan-05	Ongoing
0395	NP	Waiver for Adults with Developmental Disabilities - Residential	1915C	L	04	NP	NP	NP	Jan-05	Ongoing
0394	NP	Waiver for Adults with Developmental Disabilities - Day	1915C	L	05	NP	NP	NP	Jan-05	Ongoing
4154.R04.00	NE HCBS Waiver for Children w/DD and their Families	Waiver for Children with Developmental Disabilities	1915C	L	06	6/1/89	6/1/07	5/31/12	Jan-05	Ongoing
0246	NE - Early Intervention Waiver	Early Intervention Waiver	1915C	L	07	1/13/95	NP	1/12/10	Jan-05	Ongoing

NP = Not Provided

NEW HAMPSHIRE'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
0060.R05.00	NH Home and Community Based Care for the Elderly and Chronically Ill	Elderly & Chronically Ill - From Community	1915C	G	AC	7/1/84	7/1/07	6/30/12	Jan-05	Ongoing
0060.R05.00	NH Home and Community Based Care for the Elderly and Chronically Ill	Elderly & Chronically Ill - From Nursing Home	1915C	G	AD	7/1/84	7/1/07	6/30/12	Jan-05	Ongoing
4177.90.R2	NH Individuals w/ Acquired Brain Disorders	Acquired Brain Injury - From NH	1915C	J	BB	11/1/93	11/1/06	10/31/11	Jan-05	Ongoing
4177.90.R2	NH Individuals w/ Acquired Brain Disorders	Acquired Brain Injury - From Com	1915C	J	BC	11/1/93	11/1/06	10/31/11	Jan-05	Ongoing
0053E.90.R3	NH Individuals w/DD	MR/DD - From Community	1915C	L	AA	9/1/91	9/1/06	8/31/11	Jan-05	Ongoing
0053E.90.R3	NH Individuals w/DD	MR/DD - From Nursing Home	1915C	L	AB	9/1/91	9/1/06	8/31/11	Jan-05	Ongoing
0397.IP.90	NH - Home Support Waiver for Children with Developmental Disabilities	Home Support Waiver for Children with DD - Child from Community	1915C	L	CC	1/1/03	NP	12/31/10	Jan-05	Ongoing
0397.IP.90	NH - Home Support Waiver for Children with Developmental Disabilities	Home Support Waiver for Children with DD - Child from an Institution	1915C	L	CI	1/1/03	NP	12/31/10	NR	NR

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NEW JERSEY'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
19-W-00164/2	NP	Health Insurance Flexibility and Accountability Demonstration Initiative.	HIFA	5	10	1/31/03	NP	NP	Jan-05	Ongoing
21-W-00003/2-01	New Jersey Family Coverage Under SCHIP for Families with Pregnant Women	Family Care NJSCHIP - Demo	1115	1	08	1/18/01	1/18/01	1/31/09	Jan-05	Ongoing
11-W-00118/2	New Jersey Cash and Counseling Demonstration	Personal Preference Program	1115	1	11	10/9/98	NP	4/30/08	Jan-05	Ongoing
NJ03	New Jersey Care 2000+	NJCARE 2000+	1915B	2	09	11/2/99	10/1/00	12/31/06	Jan-05	Ongoing
0285.90.R1A	NJ - Enhanced Community Options	Enhanced Community Options	1915C	G	06	1/1/96	NP	12/31/09	Jan-05	Ongoing
0032.91.R3	NJ - Community Care Program for the Elderly and Disabled	Community Care Program for the Elderly & Disabled	1915C	G	07	10/1/91	NP	9/30/06	Jan-05	Ongoing
4133.90.R3	NJ - Community Resources for People with Disabilities	Community Resources for People with Disabilities	1915C	I	04	4/1/94	NP	3/31/09	Jan-05	Ongoing
4174.90.R1	NJ - The TBI Waiver	Traumatic Brain Injury Waiver	1915C	J	05	7/1/96	NP	6/30/06	Jan-05	Ongoing
0160.90.R2.02	NJ - ACCAP	AIDS Community Care Alternatives Program	1915C	K	02	3/1/91	3/1/01	2/28/06	Jan-05	Ongoing
0031.R01.00	NJ Renewal Waiver	DDD	1915C	L	01	10/1/93	10/1/08	9/30/13	Jan-05	Ongoing
0244.90	NP	Tech. Dependent Children under DYFS Supervision	1915C	N	03	NP	NP	NP	Jan-05	Ongoing

NP = Not Provided

NEW MEXICO'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
21-W-00012/6	New Mexico 1115 HIFA	SCI	HIFA	5	02	8/23/02	7/1/05	6/30/10	Jul-05	Ongoing
11-W-00111/6	New Mexico Family Planning 1115	Family Planning Waiver	1115	F	03	8/1/97	7/1/98	12/31/10	Jan-05	Ongoing
11-W-00124/6	New Mexico SCHIP Waiver	SCHIP	1115	1	01	1/11/99	3/31/99	12/31/07	Jan-05	Ongoing
NP	New Mexico Salud 1915(b)	SALUD	1915B	2	04	7/1/97	NP	6/30/07	Jan-05	Ongoing
NP	NM Behavioral Health Waiver	Behavioral Health	1915B	2	05	6/24/05	7/1/05	6/30/07	Jul-05	Ongoing
0169.90.R2.01	NM - 0169.90.R2.01	Disabled & Elderly HCBW	1915C	G	06	10/1/90	NP	5/31/10	Jan-05	Ongoing
0161.90.R2	NM - HCBS Waiver for Individuals with AIDS	AIDS HCBW	1915C	K	08	7/1/94	NP	6/30/10	Jan-05	Ongoing
0173.90.R2.01	NM - 0173.90.R2.01	Developmentally Disabled HCBW	1915C	L	07	2/24/91	NP	6/30/06	Jan-05	Ongoing
0223.90.R2	NM - HCBS Waiver for Medically Fragile Children	Medically Fragile HCBW	1915C	N	09	10/1/90	NP	6/30/10	Jan-05	Ongoing

NP = Not Provided

NEVADA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00212/9	1115 Hurricane Katrina Demonstration	Katrina	1115	A	HK	11/23/05	NP	6/30/06	Sep-05	Ongoing
NP	Nevada Non Emergency Transportation 1915(b)	Non-Emergency Transportation	1915B	2	TR	6/22/04	NP	6/22/06	Jan-05	Ongoing
0267.90.R..01	NV - Elderly in Adult Residential Care	HCBW for the Elderly in Adult Residential Care (WEARC)	1915C	H	WE	7/1/93	NP	6/30/06	Jan-05	Ongoing
0152.90.R3	NV - HCBS Waiver for the Frail Elderly	HCBW for the Frail Elderly (CHIP)	1915C	H	CH	7/1/95	NP	6/30/10	Jan-05	Ongoing
4150.R04.00	NV - HCBS Waiver for the Physically Disabled	HCBW for People with Physical Disabilities (WIN)	1915C	I	WI	1/1/93	1/1/08	12/31/12	Jan-05	Ongoing
0125.90.R3	NV - HCBS Waiver for Persons with MR & Related Conditions	HCBW Serving Persons with Mental Retardation and Related Conditions (MRRC)	1915C	L	MR	10/1/93	NP	9/30/08	Jan-05	Ongoing

NP = Not Provided

NEW YORK'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00114/2	New York Partnership Plan	Partnership Plan	1115	1	01	7/15/97	10/1/97	9/30/09	Jan-05	Ongoing
11-W-00114/2	New York Partnership Plan	Family Planning	1115	F	10	7/15/97	10/1/97	9/30/09	Jan-05	Ongoing
NP	New York Non Emergency Transportation Program 1915 b	NP	1915B	2	NP	1/17/96	NP	6/30/07	NR	NR
0034.90.R4	NY - 0034	LTHHCP	1915C	G	09	1/1/94	NP	12/31/08	NR	NR
4125.90R2	NY - Care at Home	CAH I&II	1915C	I	05	12/1/03	NP	11/30/08	Jan-05	Ongoing
0269.R03.00	New York Traumatic Brain Injury	TBI Waiver	1915C	J	04	4/1/95	4/1/08	3/31/13	Jan-05	Ongoing
0238.90.01	NY - 0238.90.R2	HCBS	1915C	L	02	9/1/94	NP	9/30/09	Jan-05	Ongoing
40163	NY - Care At Home III	CAH III	1915C	L	06	8/1/91	NP	9/30/09	Jan-05	Ongoing
40176.R03.00	New York SOMRDD-CAHIV	CAH IV	1915C	L	07	9/1/94	10/1/07	9/30/12	Jan-05	Ongoing
40200.R02.00	NY CAH VI	CAH VI	1915C	L	08	3/1/00	3/1/08	2/28/13	Jan-05	Ongoing
0296 .90.R1	NY - SED Children	OMH HCBS	1915C	M	03	1/1/96	NP	12/31/09	NR	NR

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OHIO'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00213/5	1115 Hurricane Katrina Demonstration	Ohio Hurricane Katrina Relief Program	1115	A	NP	12/7/05	NP	6/30/06	NR	NR
OH-12.R01	Ohio PremierCare 1915(b)	Premier Care	1915B	2	PC	5/23/01	NP	6/30/05	NR	NR
0198	NP	Passport Waiver > 14 Hours	1915C	G	2	NP	7/1/84	NP	Jan-05	Ongoing
0198.R04.00	OH - PASSPORT	Passport Waiver III	1915C	G	A	7/1/93	7/1/08	6/30/13	Jan-05	Ongoing
40196	NP	Choices Waiver	1915C	G	9	NP	NP	NP	Jan-05	Ongoing
0440.R00.01	OH Transitions II Aging Carve Out	Transitions II Aging Carve Out Waiver	1915C	G	A4	1/1/06	7/1/06	6/30/11	Oct-05	Ongoing
207.90	NP	Disability - Waiver IV	1915C	I	7	NP	NP	NP	Jan-05	Ongoing
0196	NP	Ventilator Dependent - Waiver V	1915C	I	8	NP	NP	NP	Jan-05	Ongoing
0380	NP	Level 1 Waiver MRDD	1915C	L	0	NP	NP	NP	Jan-05	Ongoing
0231.90.R1	OH - Individual Options Waiver	Individual Options Waiver > 14 Hours	1915C	L	4	7/1/91	NP	2/28/09	Jan-05	Ongoing
0231.90.R1	OH - Individual Options Waiver	Individual Options - Waiver VI	1915C	L	B	7/1/91	NP	2/28/09	Jan-05	Ongoing
0231.90.R1	OH - Individual Options Waiver	Individual Options aka OBRA	1915C	L	C	7/1/91	NP	2/28/09	Jan-05	Ongoing
0383	NP	ICF-MR - Cost Level 1	1915C	L	P	NP	NP	NP	Jan-05	Ongoing
0383	NP	ICF-MR - Cost Level 2	1915C	L	Q	NP	NP	NP	Jan-05	Ongoing
0383	NP	ICF-MR - Cost Level 3	1915C	L	R	NP	NP	NP	Jan-05	Ongoing
0383	NP	ICF-MR - Cost Level 4	1915C	L	S	NP	NP	NP	Jan-05	Ongoing
0383	NP	ICF-MR - Cost Level 5	1915C	L	T	NP	NP	NP	Jan-05	Ongoing
0291	NP	Residential Facility > 14 Hours	1915C	L	5	NP	NP	NP	Jan-05	Ongoing
0291	NP	Residential Facility Waiver	1915C	L	D	NP	NP	NP	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	OHIO HOME CARE Waiver	1915C	O	A1	7/1/99	7/1/06	6/30/11	Oct-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	NF LOC - Cost Level 1	1915C	I	E	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	NF LOC - Cost Level 2	1915C	I	F	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	NF LOC - Cost Level 3	1915C	I	G	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	NF LOC - Cost Level 4	1915C	I	I	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	NF LOC - Cost Level 5	1915C	I	J	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	SLOC - Cost Level 1	1915C	I	K	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	SLOC - Cost Level 2	1915C	I	L	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	SLOC - Cost Level 3	1915C	I	M	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	SLOC - Cost Level 4	1915C	I	N	7/1/98	NP	6/30/10	Jan-05	Ongoing
0337.R02.01	Ohio Home Care Waiver	SLOC - Cost Level 5	1915C	I	O	7/1/98	NP	6/30/10	Jan-05	Ongoing

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OKLAHOMA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00177/6	Oklahoma SoonerCare Family Planning	Oklahoma SoonerPlan Family Planning	1115	F	WH	11/5/04	4/1/05	3/31/10	Jan-05	Ongoing
11W00048/6-09	Oklahoma SoonerCare	SoonerCare Waiver	1115	1	WF	10/12/95	4/1/96	12/31/09	Jan-05	Ongoing
OK06.R00.01	Oklahoma Non Emergency Transportation 1915 (b)	OK NET Waiver	1915B	2	WG	6/2/04	NP	6/2/06	Jan-05	Ongoing
0256.R1.05	Oklahoma's Advantage Waiver	Advantage Program Waiver	1915C	G	WA	7/1/93	NP	6/30/06	Jan-05	Ongoing
0179.90.R2.05	OK - Community	Home and Community Based Waiver	1915C	L	WB	7/1/91	NP	6/30/06	Jan-05	Ongoing
0399.R01.01	OK - Homeward Bound	Homeward Bound Waiver	1915C	L	WE	7/1/03	7/1/06	6/30/11	Jan-05	Ongoing
0343.90.05	OK - In-Home Supports for Adults	In-Home Support - Adult Waiver	1915C	L	WC	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0351.R02.00	OK - In-Home Supports for Children	In-Home Support - Child Waiver	1915C	L	WD	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing

NP = Not Provided

OREGON'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00231/0	1115 Hurricane Katrina Demonstration	Hurricane Katrina Multiple State Section 1115 Demonstration (Medicaid)	1115	A	AD	3/6/06	NP	6/30/06	Aug-05	Ongoing
11-W-00142/0	Oregon Family Planning 1115	Oregon Family Planning Expansion Waiver	1115	F	AC	10/14/98	1/1/99	10/31/09	NR	NR
21-W-00013/10 11-W-00160/10	Oregon Health Plan 2	Oregon Health Plan Section 1115 Demonstration	1115	I	A7	10/15/02	NP	10/31/10	Jan-05	Ongoing
11-W00130/0	NP	Independent Choices Section 1115 Demonstration	1115	I	A2	NP	NP	NP	Jan-05	Ongoing
FM-05-0111	Oregon Non Emergency Transportation 1915(b)	Transportation Brokerage Expansion Waiver	1915B	2	A8	9/1/94	NP	6/30/07	Jan-05	Ongoing
0185.90.R2.08	Seniors and People with Disabilities	Aged and Physically Disabled Home and Community Based Section 1915(c)	1915C	G	A6	10/1/91	NP	9/30/06	Jan-05	Ongoing
0117.90.R3	OR - Waiver for Individuals with Developmental Disabilities	ICF/MR Comprehensive Residential Home and Community Based Section 1915(c)	1915C	L	A1	7/1/93	NP	6/30/08	Jan-05	Ongoing
40194.90	Children with Behavioral Health Needs	ICF/MR Behavioral Home and Community Based Section 1915(c) Model	1915C	L	A4	4/1/01	NP	3/31/09	Jan-05	Ongoing
375.90	Support Services Waiver for Adults	ICF/MR Support Services Home and Community Based Section 1915(c)	1915C	L	A5	7/1/01	NP	6/30/09	Jan-05	Ongoing
40193.90	Children with Hospital Level of Care	Hospital Medically Fragile Services Home and Community Based Section 1915(c) Model	1915C	N	A3	4/1/01	NP	3/31/09	Jan-05	Ongoing

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NR = Not Reported

PENNSYLVANIA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NP	1115 Hurricane Katrina Demonstration	Pennsylvania Hurricane Katrina Relief Program	1115	A	DR	3/6/06	NP	6/30/06	NR	NR
NP	Pennsylvania Access Plus 1915(b)	Access Plus	1915B	2	AP	12/3/04	1/1/07	12/31/08	Mar-05	Ongoing
NP	NP	Family Care Network	1915B	2	FC	NP	NP	NP	Jan-05	Feb-05
NP	Pennsylvania Health Choices 1915(b)	HealthChoices	1915B	2	HC	7/31/02	1/1/07	12/13/08	Jan-05	Ongoing
0279.90.R1	HCBS Waiver for Individuals Age 60 and Over	Pennsylvania Department of Aging (PDA)	1915C	G	38	7/1/95	NP	6/30/08	Jan-05	Ongoing
0313.90.R1	PA - Elwyn Waiver	Elwyn	1915C	I	33	10/1/96	9/30/09	NP	Jan-05	Ongoing
0277.R03.00	PA Attendant Care	Attendant Care	1915C	I	40	7/1/95	7/1/08	6/30/13	Jan-05	Ongoing
0319.90.02	PA - Office of Social Programs Independence Waiver	Office of Social Programs/Independence	1915C	I	42	7/1/97	NP	6/30/06	Jan-05	Ongoing
0386.90	PA - COMMCARE Waiver Program	CommCare	1915C	J	59	4/1/02	4/1/02	6/30/10	Jan-05	Ongoing
0192.90.R2	AIDS/HIVD	HIV/AIDS	1915C	K	80	4/1/95	NP	3/31/10	Jan-05	Ongoing
0354.R02.01	PA - Person/Family Directed Support Waiver	Person/Family Directed Support	1915C	L	68	7/1/99	7/1/07	6/30/12	Jan-05	Ongoing
0324.90	PA - ITF Waiver	Infant, Toddler, and Family	1915C	L	70	7/1/98	NP	6/30/06	Jan-05	Ongoing
0147.R04.01	PA Consolidated Waiver	Office of Mental Retardation/Consolidated	1915C	L	77	7/1/90	7/1/07	6/30/12	Jan-05	Ongoing
0235.90.R1.02	Office of Social Programs OBRA Waiver	Office of Social Programs/OBRA	1915C	L	79	10/1/91	NP	6/30/06	Jan-05	Ongoing
4144.90.R3	PA - Michael Dallas HCBS for Persons Dependent Upon a Medical Device	Michael Dallas	1915C	N	78	7/1/90	NP	6/30/10	Jan-05	Ongoing

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RHODE ISLAND'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00216/1	1115 Hurricane Katrina Demonstration	Rhode Island Katrina Waiver	1115	A	NP	2/17/06	NP	6/30/06	NR	NR
11-W-000041	Rhode Island RItCare 1115	RItCare	1115	I	RC	11/1/93	8/1/94	9/30/11	Jan-05	Ongoing
11-W-000041	Rhode Island RItCare 1115	Family Planning	1115	F	RC	11/1/93	8/1/94	9/30/11	Jan-05	Ongoing
0040.90.R5	RI HCBS for the Aged and Disabled	HCBS Aged & Disabled	1915C	G	W1	4/1/85	4/1/08	3/31/13	Jan-05	Ongoing
0335.90.R1	RI HCBS for Elders and Adults w/Disabilities in Assisted Living	HCBS Assisted Living	1915C	G	W7	1/1/99	1/1/07	12/31/11	Jan-05	Ongoing
0379.90	RH - Disabled Individuals	HCBS Habitation	1915C	G	W8	12/1/01	NP	11/30/09	NR	NR
0176.90.R3	RI HCBS for the Elderly	HCBS DEA	1915C	H	W2	7/1/88	7/1/06	6/30/11	Jan-05	Ongoing
40126.90.R3	RH - PARI Waiver	HCBS Severely Disabled	1915C	I	W4	4/1/94	NP	3/31/09	Jan-05	Ongoing
0162.90.R3	RI	HCBS MRDD	1915C	L	W3	7/1/91	7/1/06	6/30/11	Jan-05	Ongoing

NP = Not Provided

NR = Not Reported

SOUTH CAROLINA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-001501/4	Prescription Drug Benefit for South Carolina's Low Income Seniors	SilverRXcard	Pharm	6	WP	7/30/02	1/1/03	12/31/05	Jan-05	Ongoing
11-W-00207/4	1115 Hurricane Katrina Demonstration	Katrina Multi-State 1115 Demonstration	1115	A	WK	10/21/05	NP	6/30/06	Aug-05	Ongoing
11-W-00007/4	South Carolina Family Planning Demonstration	Family Planning	1115	F	WF	12/17/93	7/1/94	12/31/07	Jan-05	Ongoing
0104.90.R3	SC - Waiver for Elderly and Disabled Individuals	Aged and Disabled	1915C	G	WE	10/1/92	NP	9/30/07	Jan-05	Ongoing
0405-IP.02	SC - Choice	South Carolina CHOICE	1915C	G	WS	7/1/03	NP	6/30/06	Jan-05	Ongoing
0284.R03.00	SC Head and Spinal Cord Injury	Individuals with Head and Spinal Cord Injuries	1915C	J	WH	7/1/95	7/1/08	6/30/13	Jan-05	Ongoing
0186.90.R2	SC - HIV/AIDS Waiver	HIV AIDS	1915C	K	WA	10/1/91	10/1/06	9/30/11	Jan-05	Ongoing
0237.90.R2	SC - Mental Retardation/Related Disabilities	Mental Retardation and Related Disabilities	1915C	L	WM	10/1/94	NP	9/30/09	Jan-05	Ongoing
40181.90.R1	SC - Vent Waiver	Ventilator Dependent	1915C	N	WV	12/1/94	12/1/07	11/30/12	Jan-05	Ongoing

NP = Not Provided

SOUTH DAKOTA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
0189.90.R2	SD - Elderly	Elderly	1915C	H	01	10/1/91	NP	9/30/06	Jan-05	Ongoing
0264.R01.02	SD - Assistive Daily Living Services	Assistive Daily Living Services	1915C	I	04	6/1/94	6/1/07	5/31/12	Jan-05	Ongoing
0044.R01.00	SD CHOICES	Developmentally Disabled	1915C	L	02	6/1/80	6/1/08	5/31/13	Jan-05	Ongoing
0338.90	SD - Family Support Waiver	Family Support	1915C	L	03	10/1/98	6/1/07	5/31/12	Jan-05	Ongoing

NP = Not Provided

TENNESSEE'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00203/4	1115 Hurricane Katrina Demonstration	Tennessee Hurricane Katrina Multi-State Demonstration	1115	A	10	10/6/05	NP	6/30/06	Jul-05	Ongoing
95W00071/4-01	NP	PACE	1115	1	08	NP	NP	NP	Jan-05	Ongoing
11W00151/4	Tennessee TennCare 1115	TENNCARE II All TennCare eligibles	1115	1	01	5/30/02	7/1/02	6/30/10	Jan-05	Ongoing
TN02.000.02	Tennessee TennCare for Medicaid Medicare Duals 1915(b)	FOC Duals Medicaid/Medicare dual eligibles	1915B	2	02	6/28/02	7/1/02	6/30/04	Jan-05	Ongoing
0062.90.R3	TN - HCBS Shelby Co.	HCBWAGD Shelby Co HCBS	1915C	G	03	7/1/94	NP	6/30/09	Jan-05	Ongoing
0381.R01.01	TN HCBS Elderly and Disabled	HCBWAGD Commission on Aging Waiver	1915C	G	07	5/1/02	7/1/08	9/30/11	Jan-05	Ongoing
0248.90.R1	TN - ADAPT	HCBWAGD Adapt Waiver	1915C	G	05	11/1/95	NP	9/30/08	Jan-05	Ongoing
0128.90.R1.05	NP	HCBWMRDD MR/DD Adult Waiver	1915C	L	04	NP	NP	NP	Jan-05	Ongoing
0357.90	TN - HCBS MR (Arlington)	HCBWMRDD MR/DD Arlington Waiver	1915C	L	06	7/1/00	NP	12/31/09	Jan-05	Ongoing
0427.R01.00	TN - Self Determination Waiver	HCBWMRDD Self Determination Waiver	1915C	L	09	1/5/05	1/1/08	12/31/13	Jul-05	Ongoing

NP = Not Provided

TEXAS'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00195/6	1115 Hurricane Katrina Demonstration	Katrina Waiver	1115	A	G1	9/15/05	NP	6/30/06	Jul-05	Ongoing
NP	NP	STAR (Managed Care - Statewide)	1915B	2	F1	NP	NP	NP	Jan-05	Ongoing
NP	NP	NorthSTAR (Behavioral Managed Care - Dallas, TX)	1915B	2	F2	NP	NP	NP	Jan-05	Ongoing
NP	Texas Disease Management	NP	1915B	2	NP	8/9/05	8/9/05	8/8/07	NR	NR
0266.R03.01	TX Community Based Alternatives	Community Based Alternatives (CBA)	1915C	G	D3	3/1/94	9/1/07	8/31/12	Jan-05	Ongoing
0373 & 0374	NP	Consolidated Waiver Program (CWP)	1915C	G & L	E7	NP	NP	NP	Jan-05	Ongoing
0325.90	TX	NP	1915C	G	NP	2/1/01	NP	3/26/11	NR	NR
0281.90.R1	TX Deaf Blind w/ Multiple Disabilities	Deaf Blind with Multiple Disabilities (DBMD)	1915C	I	E6	3/1/95	3/1/08	2/29/13	Jan-05	Ongoing
0221.90.R2	TX - Community Living Assistance and Support Services(CLASS) Program	Community Living Assistance and Support Services (CLASS)	1915C	L	D2	9/1/94	NP	8/31/09	Jan-05	Ongoing
0110.R04.00	TX HCBS Program	Home and Community-based Services -OBRA (HCS-O)	1915C	L	E3	9/1/83	9/1/08	8/31/13	NR	NR
0403	TX - Home & Community-Based Services	Texas Home Living (TxHmL)	1915C	L	E5	9/1/93	NP	8/31/09	Jan-05	Ongoing
0330.90	TX - Mental Retardation Local Authority (MRLA)	NP	1915C	L	NP	6/1/98	NP	2/25/07	NR	NR
0181.R04.01	TX - Medically Dependent Children Program	Home and Community-Based Services (HCS)	1915C	N	E2	7/1/88	9/1/07	8/31/12	Jan-05	Ongoing
0181	NP	Medically Dependent Children Program (MDCP)	1915C	N	E8	NP	NP	NP	Jan-05	Ongoing
NP	Texas Star+Plus	STAR+PLUS (Aged & Disabled Managed Care - Houston,TX)	1915BC	4	E9	1/30/98	2/1/98	8/31/06	Jan-05	Ongoing

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UTAH'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00229/8	1115 Hurricane Katrina Demonstration	Katrina	1115	A	07	3/20/06	NP	6/30/06	Aug-05	Ongoing
11W00145/8	Utah Primary Care Network PCN 1115	PCN	1115	1	06	2/8/02	7/1/02	6/30/10	Jan-05	Ongoing
UT01.R08	Utah Choice of Health Care Delivery Program 1915(b)	Freedom of Choice (Physical Health)	1915B	2	08	3/23/82	1/1/06	12/31/07	Jan-05	Ongoing
UT02.05	Utah - Prepaid Mental Health Plan	Prepaid Mental Health	1915B	2	09	12/20/01	12/27/01	1/31/08	Jan-05	Ongoing
UT03.R01	Utah Non-Emergency Transportation Waiver 1915(b)	Non-Emergency Transportation	1915B	2	10	9/19/00	9/9/04	9/30/06	Jan-05	Ongoing
0247.90.R2	UT - Individuals Aged 65 and Older	Aged - Individuals 65 and Over	1915C	H	05	7/1/92	NP	6/30/10	Jan-05	Ongoing
0331.90	UT - Physical Disabilities	Physical Disabilities	1915C	I	03	7/1/98	NP	12/27/06	Jan-05	Ongoing
0292.90.R1	UT - Acquired Brain Injury	Traumatic Brain Injury	1915C	J	04	7/1/96	NP	6/30/09	Jan-05	Ongoing
0158.90.R3	UT - DD/MR	Developmentally Disabled / Mentally Retarded	1915C	L	01	7/1/90	NP	6/30/10	Jan-05	Ongoing
40183.R02.00	UT Waiver for Technology Dependant, Medically Fragile Individuals	Technology Dependent HCBS Waiver	1915C	N	02	1/1/95	7/1/08	6/30/13	Jan-05	Ongoing

NP = Not Provided

VIRGINIA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00220/3	1115 Hurricane Katrina Demonstration	Katrina and Rita Emergency Evacuees	1115	A	EA	3/20/06	NP	6/30/06	Aug-05	Ongoing
1-W-00152/3	Virginia Family Planning 1115	Family Planning	1115	F	F1	7/22/02	10/2/02	9/30/10	Jan-05	Ongoing
VA.03.R04	Virginia Managed Care Waiver 1915(b)	Medallion - PCCM	1915B	2	M1	12/23/91	7/1/07	6/30/09	Jan-05	Ongoing
VA.03.R04	Virginia Managed Care Waiver 1915(b)	Medallion - MCO	1915B	2	M2	12/23/91	7/1/07	6/30/09	Jan-05	Ongoing
VA.03.R04	Virginia Managed Care Waiver 1915(b)	Medallion - PCCM and MCO	1915B	2	M3	12/23/91	7/1/07	6/30/09	Jan-05	Ongoing
VA-04	Virginia Non Emergency Transportation Waiver 1915(b)	NP	1915B	2	NP	8/23/05	NP	8/31/07	NR	NR
0048.90R.1	NP	Aged and Disabled	1915C	G	A3	NP	NP	NP	Jan-05	Ongoing
0321.R02.01	VA Elderly or Disabled w/Consumer Direction	Consumer-Directed Personal Attendant Services	1915C	G	C3	7/1/97	7/1/07	6/30/12	Jan-05	Jul-05
40206.R01.00	VA Alzheimer's Assisted Living	Alzheimer's Assisted Living Waiver	1915C	G	NP	7/1/05	7/1/05	6/30/13	NR	NR
4160.R03.01	VA HIV/AIDS	HIV/AIDS	1915C	K	H3	7/1/94	7/1/07	6/30/12	Jan-05	Ongoing
0358.R02.00	VA Individual & Family DD Support	Developmental Disorders	1915C	L	D3	7/1/00	7/1/08	6/30/13	Jan-05	Ongoing
0372.90	VA - Mental Retardation	Mental Retardation and Developmental Disabilities	1915C	L	R3	9/15/01	NP	6/30/09	Jan-05	Ongoing
0430.R01.00	VA Day Support HCBW for Persons w/MR	Day Support Waiver for MR Individuals	1915C	L	S3	7/1/05	7/1/08	6/30/13	Jul-05	Ongoing
4149.R02.00	VA Technology Assisted	Technology Assisted Waiver	1915C	N	T3	12/1/91	7/1/08	6/30/08	Jan-05	Ongoing

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VERMONT'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00051/1	Vermont Health Access Plan 1115	PC Plus	1115	1	V6	7/28/95	1/1/96	12/31/03	Jan-05	Sep-05
11-W-00051/1	Vermont Health Access Plan 1115	CRT	1115	1	V7	7/28/95	1/1/96	12/31/03	Jan-05	Ongoing
11-W-00051/1	Vermont Health Access Plan 1115	VHAP Rx	1115	6	V8	7/28/95	1/1/96	12/31/03	Jan-05	Sep-05
11-W-00191/1	VT Long-Term Care Plan	ERC	1115	1	L1	6/13/05	10/1/05	9/30/10	Oct-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	HCBS Aged and Disabled	1115	1	L2	6/13/05	10/1/05	9/30/10	Oct-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	SNF	1115	1	L3	6/13/05	10/1/05	9/30/10	Sep-05	Ongoing
11-W-00191/1	VT Long-Term Care Plan	PACE	1115	1	L4	6/13/05	10/1/05	9/30/10	NR	NR
11-W-00191/1	VT Long-Term Care Plan	Flexible Spending/Cash and Counseling	1115	1	L5	6/13/05	10/1/05	9/30/10	NR	NR
11-W-001941/1	Vermont Global Commitment to Healthcare	PC Plus	1115	1	G4	9/27/05	10/1/05	9/27/10	Jan-05	Ongoing
11-W-001941/1	Vermont Global Commitment to Healthcare	VHAP Rx	1115	6	G6	9/27/05	10/1/05	9/27/10	Jan-05	Ongoing
40186	NP	ERC	1915C	G	V2	NP	NP	NP	Jan-05	Ongoing
0163	NP	HCBS Aged and Disabled	1915C	G	V3	NP	NP	NP	Jan-05	Ongoing
40182	NP	TBI	1915C	J	V4	NP	NP	NP	Jan-05	Ongoing
0047.90R3	NP	Developmental Services	1915C	L	V1	NP	NP	NP	Jan-05	Ongoing
0047.91R3	NP	Children's Mental Health	1915C	M	V5	NP	NP	NP	Jan-05	Ongoing

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NR = Not Reported

WASHINGTON'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00134/0-01	Washington Family Planning 1115	Take Charge Family Planning	1115	F	TC	3/6/01	7/1/01	6/30/09	Jan-05	Ongoing
11-W-00180/0	Washington Premium Proposal 1115	NP	1115	1	NP	2/13/04	NP	1/31/09	NR	NR
0WA08.R03.01	Washington Mental Health	Integrated Community Mental Health Program	1915B	2	MH	3/1/02	3/5/02	3/31/08	Jan-05	Ongoing
WA05.R06.01	Washington Selective Hospital Contracting Program 1915(b)	Hospital Selective Contracting Program	1915B	2	SC	4/1/88	NP	6/30/07	NR	NR
WA10.000.01	Washington Disease Management	Washington Disease Management Program	1915B	2	DM	3/3/03	6/30/05	6/30/07	NR	NR
NP	Washington Healthy Options 1915(b)	NP	1915B	2	NP	10/1/93	NP	6/30/07	NR	NR
0049.91.R4	WA - Community Options Program Entry System	Community Options Program Entry System (COPES)	1915C	G	CO	4/1/94	NP	3/31/09	NR	NR
0419.R01.01	WA Medically Needy In Home	Medically Needy In-Home Waiver	1915C	G	IH	5/1/04	5/1/07	4/30/12	NR	NR
0390.90	WA - Medically Needy Residential Waiver	ABD (Community Setting) Waiver	1915C	G	CS	5/1/02	NP	4/30/10	NR	NR
0408	WA - Basic Waiver	Basic Waiver	1915C	L	BW	1/1/04	NP	NP	NR	NR
0409	WA - Basic Plus Waiver	Basic Plus Waiver	1915C	L	BP	4/1/04	NP	3/31/07	NR	NR
0410	WA - Core Waiver	Core Waiver	1915C	L	CW	4/1/04	NP	3/31/07	NR	NR
0411	WA - Public Safety Waiver	Public Safety Waiver	1915C	L	PS	4/1/04	NP	3/31/07	NR	NR
0050.90.R2.02	NP	Community Alternatives Program (CAP)	1915C	O	CA	NP	NP	NP	NR	NR

NP = Not Provided

NR = Not Reported

WISCONSIN'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11W00149	NP	SeniorCare	Pharm	6	C1	NP	NP	NP	Jan-05	Ongoing
11-W-00222/5	1115 Hurricane Katrina Demonstration	Wisconsin Hurricane Katrina Relief Program	1115	A	NP	3/24/06	NP	6/30/06	NR	NR
11W00144	Wisconsin Family Planning 1115	Family Planning Waiver	1115	F	D1	6/14/02	1/1/03	12/31/10	Jan-05	Ongoing
11W00125 and 21W00001	Wisconsin Badger Care 1115	BadgerCare	1115	1	A1	1/22/99	5/30/07	3/31/10	Jan-05	Ongoing
11W00125 and 21W00001	Wisconsin Badger Care 1115	BadgerCare	1115	1	B1	1/22/99	5/30/07	3/31/10	Jan-05	Ongoing
11W00123	NP	Wisconsin Partnership Program - Partnership	1115	1	E1	NP	NP	NP	Jan-05	Ongoing
NP	Wisconsin Allied Services for Healthy Foster Children 1915(b)	NP	1915B	2	NP	7/1/04	NP	6/30/06	NR	NR
0154.90.R3	WI - Wisconsin Community Options Program (COP)	Wisconsin HCBS Waiver: Aged and Disabled	1915C	G	F1	1/1/95	NP	12/31/09	NR	NR
0367.90	WI - Family Care-Aged/PD	Wisconsin HCBS Waiver: Aged and Disabled	1915C	G	K1	1/1/02	NP	12/31/09	NR	NR
0413	WI - Children's Physical Disability Waiver	CLTS - Kids Physical Disabilities	1915C	I	O1	11/20/03	NP	10/19/06	NR	NR
0275	NP	Wisconsin HCBS Waiver: TBI	1915C	J	H1	NP	NP	NP	NR	NR
NP	WI - Services to Persons with Brain Injuries in WI	NP	1915C	J	NP	1/1/95	NP	12/31/08	NR	NR
0229	NP	Wisconsin HCBS Waiver: DD	1915C	L	G1	NP	NP	NP	NR	NR
0297	NP	Wisconsin HCBS Waiver: MR/DD	1915C	L	J1	NP	NP	NP	NR	NR
0368.90	WI - Family Care-MR/DD	Wisconsin HCBS Waiver: MR/DD	1915C	L	L1	1/1/02	NP	12/31/09	NR	NR
0414	WI - Children's Developmental Disability Waiver	CLTS - Kids DD	1915C	L	P1	11/20/03	NP	10/19/06	NR	NR
NP	WI - Wisconsin Community Integration Program (CIP)	NP	1915C	L	NP	1/1/94	NP	12/31/09	NR	NR
0415	WI - Children's Mental Health Waiver	CLTS - Kids MH	1915C	M	R1	11/20/03	NP	10/19/06	NR	NR
W107	Wisconsin Family Care Concurrent b/c Waiver	Family Care - Counties outside Milwaukee	1915B	4	M1	6/1/01	1/1/02	1/1/08	NR	NR
W108	Wisconsin Family Care Concurrent b/c Waiver	Family Care - Milwaukee	1915B	4	N1	6/1/01	1/1/02	1/1/08	NR	NR

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WEST VIRGINIA'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
NP	West Virginia Mountain Health Trust 1915(b)	Mountain Health Trust - HMO Program	1915B	2	MH	4/29/96	NP	6/30/06	Jan-05	Ongoing
0134.90.R2	NP	Waiver Program for the Aged and Disabled	1915C	G	AD	NP	NP	NP	Jan-05	Ongoing
0420	WV - Aged and Disabled in Assisted Living	NP	1915C	G	NP	7/22/04	NP	6/30/09	NR	NR
0133.90.R2	NP	MR/DD Waiver	1915C	L	DD	NP	NP	NP	Jan-05	Ongoing

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WYOMING'S 2005 MEDICAID WAIVERS

Waiver Number (CMS or State)	Waiver Name (CMS)	Waiver Name (State)	CMS Waiver Type	MAX Waiver Type	MAX Waiver ID	Original CMS Approval Date	Most Recent Renewal Date (CMS)	Expiration/ Renewal Date (CMS)	MAX Reporting Start Date	MAX Reporting End Date
11-W-00219/8	1115 Hurricane Katrina Demonstration	Wyoming Katrina Waiver	1115	A	NP	2/17/06	NP	6/30/06	NR	NR
0236.90.R2	WY - LTC/HCBS Waiver	HCBS For the Elderly and Disabled	1915C	G	W2	7/1/93	NP	6/30/11	Jan-05	Ongoing
0369.90	WY - ALF Waiver	HCBS for Assisted Living Facility Individuals	1915C	G	W4	7/1/01	NP	6/30/09	Jan-05	Ongoing
0370.90	WY - ABI-HCBS for Adults	HCBS for Acquired Brain Injury Individuals	1915C	J	W5	7/1/01	NP	6/30/09	Jan-05	Ongoing
0226.90.R2	WY - Adult DD Home and Community Based Waiver	HCBS For Developmentally Disabled Adults 21 Years of Age and Older	1915C	L	W1	7/1/94	NP	6/30/09	Jan-05	Ongoing
0253.90.R2	WY - Developmentally Disabled Children	HCBS for Developmentally Disabled Children Birth Thru 20 Years of Age	1915C	L	W3	7/1/92	NP	6/30/10	Jan-05	Ongoing

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