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**A Government Performance
and Results Act (GPRA)
Report: The Status of the
Medicaid Infrastructure Grants
Program as of 12/31/08**

Final Report

December 23, 2009

Sarah Croake
Su Liu



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Policy Research, Inc.

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I. PURPOSE OF REPORT AND HIGHLIGHTS OF FINDINGS

The Medicaid Infrastructure Grant (MIG) program provides funding to states for the development of infrastructure necessary to promote competitive employment for people with disabilities and reduce the obstacles they face as they attempt to find and/or maintain employment. It was authorized as part of the Ticket to Work and Work Incentives Improvement Act of 1999 (hereafter, the Ticket Act). Through the Medicaid Buy-In program, the Ticket Act also expanded Medicaid coverage by providing health care and related services to enhance employment options for certain categories of employed individuals with disabilities. The MIG program has been administered by the Centers for Medicare & Medicaid Services (CMS) since its inception in 2001. Its goals have become increasingly relevant for workers with disabilities during the current economic recession. The program will no longer award funding to states after fiscal year (FY) 2011.

The MIG program has three major goals: (1) protecting and enhancing health care, other benefits, and necessary employment supports; (2) maximizing employment for people with disabilities; and (3) expanding the states' labor force by encouraging people with disabilities to work. More than \$205 million of MIG funding was awarded between 2001 and 2008 to 49 states plus the District of Columbia and the U.S. Virgin Islands. In 2008 and throughout all years of the program, states have used MIG funds to support planning and establishment of the Medicaid Buy-In program, personal assistance services (PAS), supported employment, transportation, benefits counseling and work incentives programs, employment training and education, employment networking, research and evaluation, outreach, and other infrastructure improvement activities.

Under a contract with CMS, Mathematica Policy Research has produced an annual GPRA report since 2007 (Beauchamp et al. 2007; Gruman et al. 2008) to track outputs and outcomes of MIG programs operating in each year, and to follow the programs' progress toward the above set of goals. Last year's report described MIG activities and performance; reported data on the enrollment, earnings, and premiums of Medicaid Buy-In participants; and presented general statistics on the employment of working adults with disabilities during the 2007 calendar year. This report builds on our previous work, using 2008 data to update the MIG performance measures, with a focus on patterns that differ from prior trends. In particular, it includes information from two new sources: a 2009 report on the medical expenditures of Buy-In participants, and state responses to the 2008 Buy-In Policy Change Questionnaire, completed by all states with both MIG funding and a Medicaid Buy-In program in 2008. More details on data sources consulted in preparing this report are provided in Appendix A.

The organization of this report remains largely unchanged from previous years. The report shows the continued impact of MIG funding in 2008 on programs and services that facilitate employment among individuals with disabilities. Some findings highlights include:

- Despite discontinuation of MIG funding in two states, total MIG funding increased by 18 percent between 2008 and 2007, to \$40.2 million, indicating intensified efforts in the grantee states to sustain existing programs and explore new ones.

- Enrollment in the Medicaid Buy-In program continued to grow. During 2008, nearly 120,000 participants enrolled for at least one month across the 35 MIG states that also had a Buy-In program, including two new programs implemented in 2008.
- Among Buy-In participants with earnings, average inflation-adjusted earnings in 2008 ranged from \$4,790 in Wisconsin to \$15,811 in Arkansas.
- Thirteen of the 35 states saw increases in average earnings among Buy-In participants with positive earnings, a commendable outcome in a tough employment environment. Indeed, states have expressed concerns that the full impact of recession on employment outcomes among this population has yet to be seen.
- Nevertheless, the sum of annual earnings among all Buy-In participants in 2008 totaled nearly \$709 million in 2008, a more than four percent increase from 2007.
- In total, nearly \$27 million was charged in premiums to Buy-In participants in 2008, nearly the same as the total amount charged in 2007.
- Every state granted MIG funding in 2008 has met the requirement to provide PAS for people with disabilities in full-time, competitive employment, again highlighting the important role MIG has played in encouraging states to expand PAS coverage.
- In addition to operating the Medicaid Buy-In program and improving access to PAS, states continued to use MIG funds to support a wide range of related infrastructure activities. As the MIG program approaches the end of its currently authorized period, many states are committing to evaluating the programs, documenting their impacts, and sustaining the efforts beyond 2011.

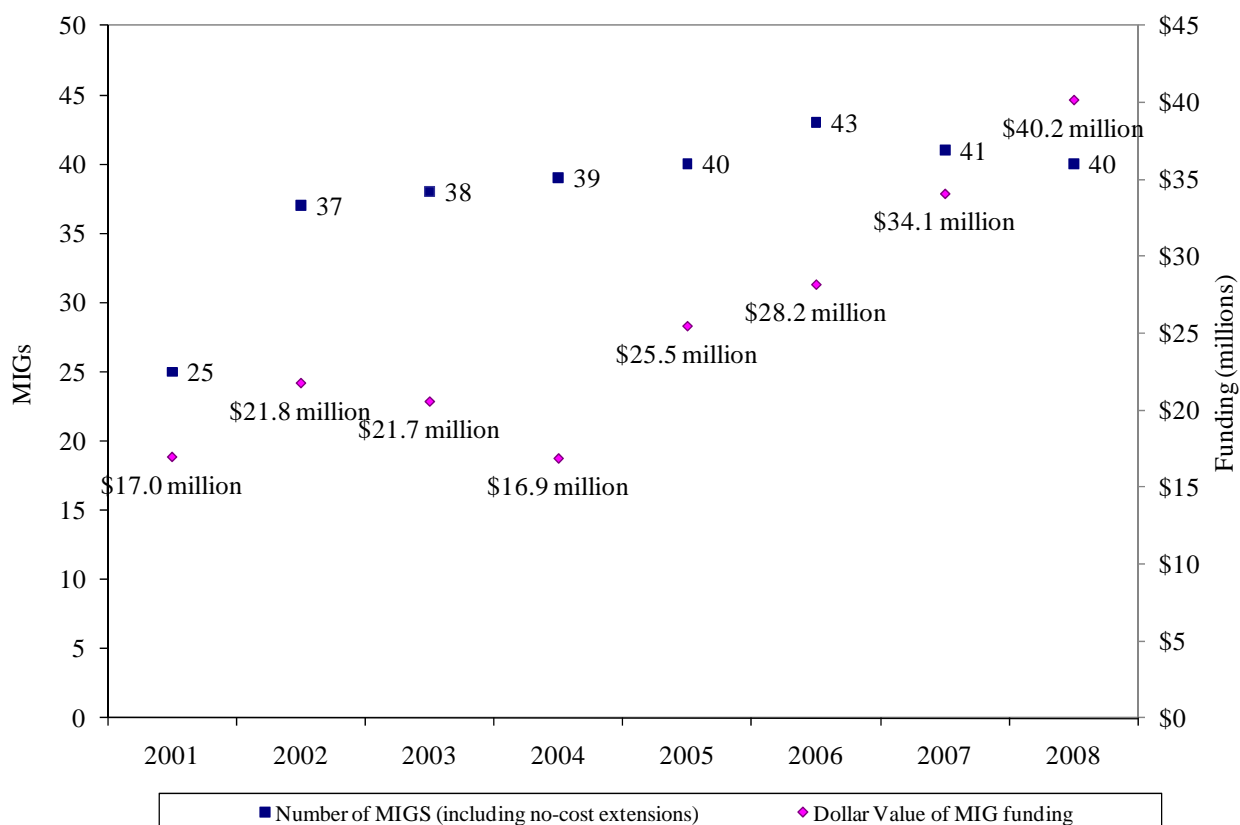
II. MIG AWARDS, FUNDING, AND ACTIVITIES

A. Number of MIG Awards and Funding Amounts

State interest in the MIG program remained strong in 2008. During the year, there were 40 MIGs nationwide (including three states with a no-cost extension from an earlier grant period). Only two states (Missouri and South Carolina) with MIG funding in 2007 did not receive funding in 2008, while one state, Texas, received new MIG funding in 2008, resulting in a net decrease of one MIG, from 41 to 40, between 2007 and 2008.

Despite this decrease, the total funding for MIG grants increased by 18 percent, to a total of \$40.2 million (Figure II.1). Funding amounts to states ranged from the minimum of \$500,000 which was awarded in 21 states, to \$6.7 million in Wisconsin. Only three states (Kansas, Maine, and New Mexico) received a lower funding amount in 2008 than in 2007. Because states' funding amounts are based on yearly Buy-In service expenditures, this overall increase is likely a reflection of higher enrollment in the Buy-In program, greater per-person Medicaid expenditures among Buy-In participants, and/or additional infrastructure development activities.

Figure II.1. Number of MIGs and Total MIG Funding, by Year, 2001-2008



Source: Beauchamp et al. (2007), Gruman et al. (2008), and email and telephone communication with CMS staff.

B. The Range of Activities Supported by MIG Funding

Different types of MIG grants are awarded based on the types of activities proposed by the states. In 2008, states could apply for one of two grant types: “basic,” to develop basic infrastructure, such as a Medicaid Buy-In program, or “comprehensive,” to develop comprehensive employment systems infrastructure in states that have already developed effective Medicaid services outside of a Buy-In program, in order to further increase employment among people with disabilities. Additionally, states that do not meet full eligibility criteria but have statewide PAS programs of more limited scope may receive a conditional grant. States that commit to the improvements necessary to reach the level of service required for a basic grant by the last day of the first full year of funding may also apply under this category (Table B.1). Just over half of MIG states held basic grants in 2008, an increase of seven over 2007; while 16 states had comprehensive grants, an increase of two over the previous year (Tables B.2 and B.3). An additional three states (North Carolina, Pennsylvania, and Montana) held no-cost extension conditional grants from the previous year, a decrease from the 12 conditional grants held by states in 2007. It appears that many of these states established Medicaid Buy-In Programs and moved from conditional to basic grant status during the 2001-2007 period (Table B.4).

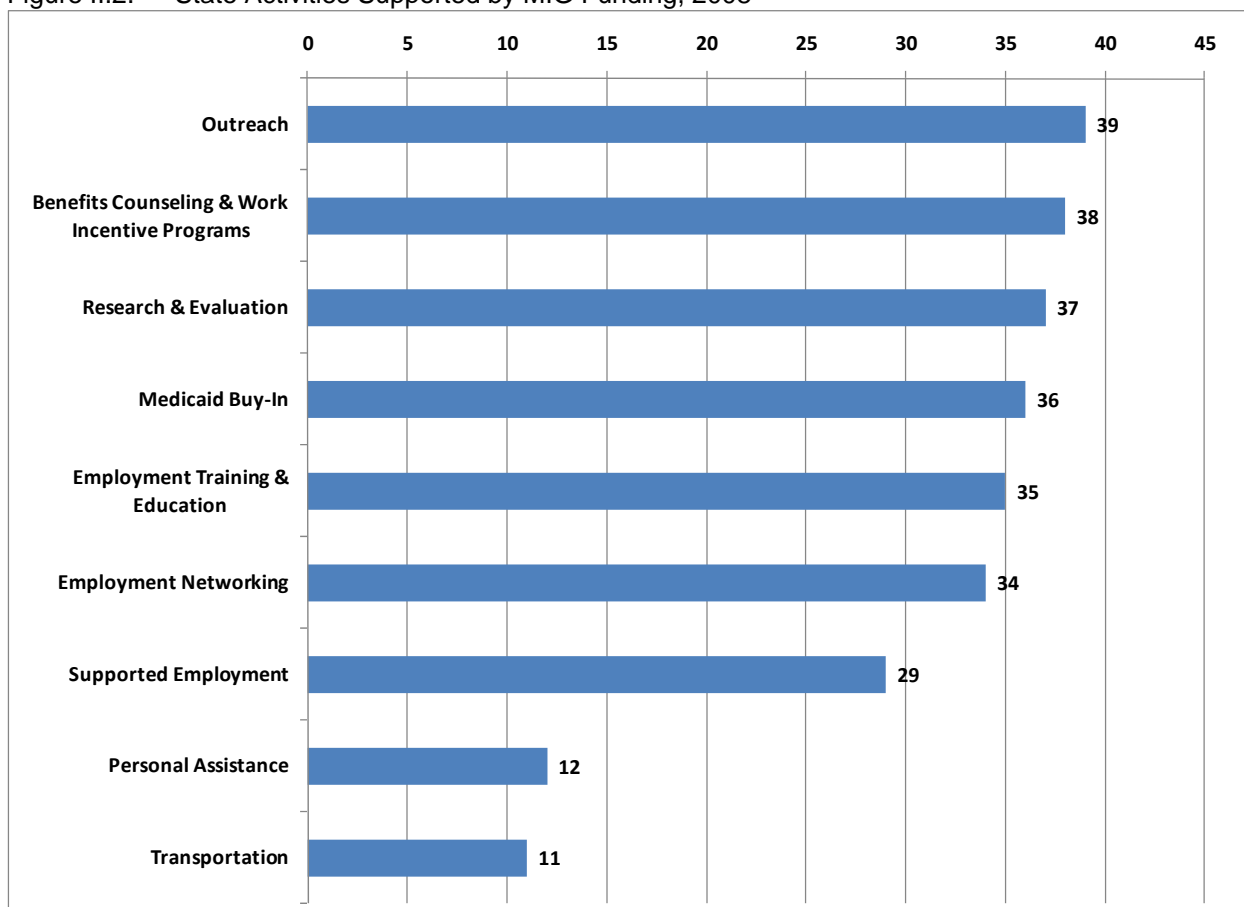
MIG funding supported a wide range of activities in 2008, as reported in a questionnaire completed by 40 MIG directors or their designees in early 2009.¹ MIGs reported on activities in nine MIG outcome areas during the 2008 calendar year (Figure II.2). Activities within each outcome area range from the development of policies and processes, to the implementation and support of existing policies and programs. The top four areas for activity were outreach, benefits counseling and work incentive programs, research and evaluation, and the Medicaid Buy-In. Personal assistance and transportation received the least attention. Although the questionnaires changed slightly and thus were not directly comparable between 2007 and 2008, the level of state activity in each outcome area was generally consistent across the surveys, with the exception of a slight shift away from the development of policies. It is likely that as programs have matured, activities related to implementation have become a greater focus.

Examples of the wide range of activities supported by MIG funding in 2008 include the following:

- Connecticut used MIG funding to support data integration across multiple agencies within the Bureau of Rehabilitation Services, which has enabled the state to collect and analyze information on Medicaid Buy-In participants, consumers of vocational rehabilitation (VR) services, and the use of benefits counseling services to improve the employment outcomes of people with disabilities.
- Arkansas used MIG funding to implement and publicize the Employment Services Hotline, which provides information regarding the state’s Buy-In program, benefits counseling, vocational services, and independent living services.

¹ Appendix A contains additional information about this questionnaire and includes detailed state responses.

Figure II.2. State Activities Supported by MIG Funding, 2008



Source: 2009 MIG Program-Level Outcome Questionnaire.

- In Indiana, MIG funds were used to support a statewide roll-out of the Project Search initiative, which helps youth make the transition from school to employment. Each Project Search team consists of a VR counselor and a statewide coordinator from the Indiana Institute on Disability. Eight teams began operation in what may grow to five Project Search sites across the state.
- Building on a model developed with past MIG funding, Massachusetts used MIG funding for a Peer Employment Project, to train people with disabilities as mentors to provide information and supports to peers regarding benefits, employment services, and work participation.
- The state of Washington conducted a study that compared Buy-In participants to conventional Medicaid beneficiaries on outcomes surrounding employment, earnings, taxation, stability of health coverage, and reliance on food support programs. The findings, published in 2009, show that Buy-In participants in Washington may be achieving greater self-sufficiency than their conventional-Medicaid counterparts (Shah et al. 2009).

These examples illustrate the ways in which MIG programs attempt to create lasting changes by investing in research, training, outreach, programs, and other infrastructure supporting workers with disabilities.

III. MIG PERFORMANCE: PROTECTING AND ENHANCING WORKER'S HEALTH CARE, OTHER BENEFITS, AND EMPLOYMENT SUPPORTS

A. Growth in Medicaid Buy-In Enrollment

Since 2001, many states have used MIG funding to develop, implement, and support Medicaid Buy-In programs (Table B.5). This continues to be the case. In 2008, 35 states with MIG grants also had a Buy-In program, referred to in this report as MIG/Buy-In States.² Every state that had a Buy-In program in 2007 maintained it in 2008, while two MIG states, Ohio and North Carolina, added a new Buy-In program during the year.³

Buy-In enrollment has continued to grow since the start of the MIG program. During 2008, a total of 119,424 participants were enrolled at some point across the 35 MIG/Buy-In states, an increase of 10 percent from 2007 (Figure III.1).⁴ This upward trend was consistent across all but nine states (Table B.6). Among Buy-In participants in 2008, nearly 32,000 individuals (27 percent) were first-time enrollees, an increase of five percent from 2007 (Table B.7). Continuing growth in the number of Buy-In programs, together with increased enrollment in the programs, contributed to a total of more than 251,712 participants who have benefited from the Buy-In since the first program was established in 1997.

The economic downturn may be affecting Buy-In growth. The 2008 Buy-In Policy Change Questionnaire asked states to identify reasons behind small changes (five percent or less) in Buy-In enrollment between 2007 and 2008.⁵ The responses suggest that the economic downturn may be limiting the growth in Buy-In program enrollment, as participants must remain employed in order to stay eligible for the program. Among the eight states with either low growth or a reduction in enrollment in 2008, five cited the lack of employment opportunities as a reason for the Medicaid Buy-In's low growth rate. In the previous year's survey, none of the states with small changes in enrollment identified a lack of employment opportunities as a cause.

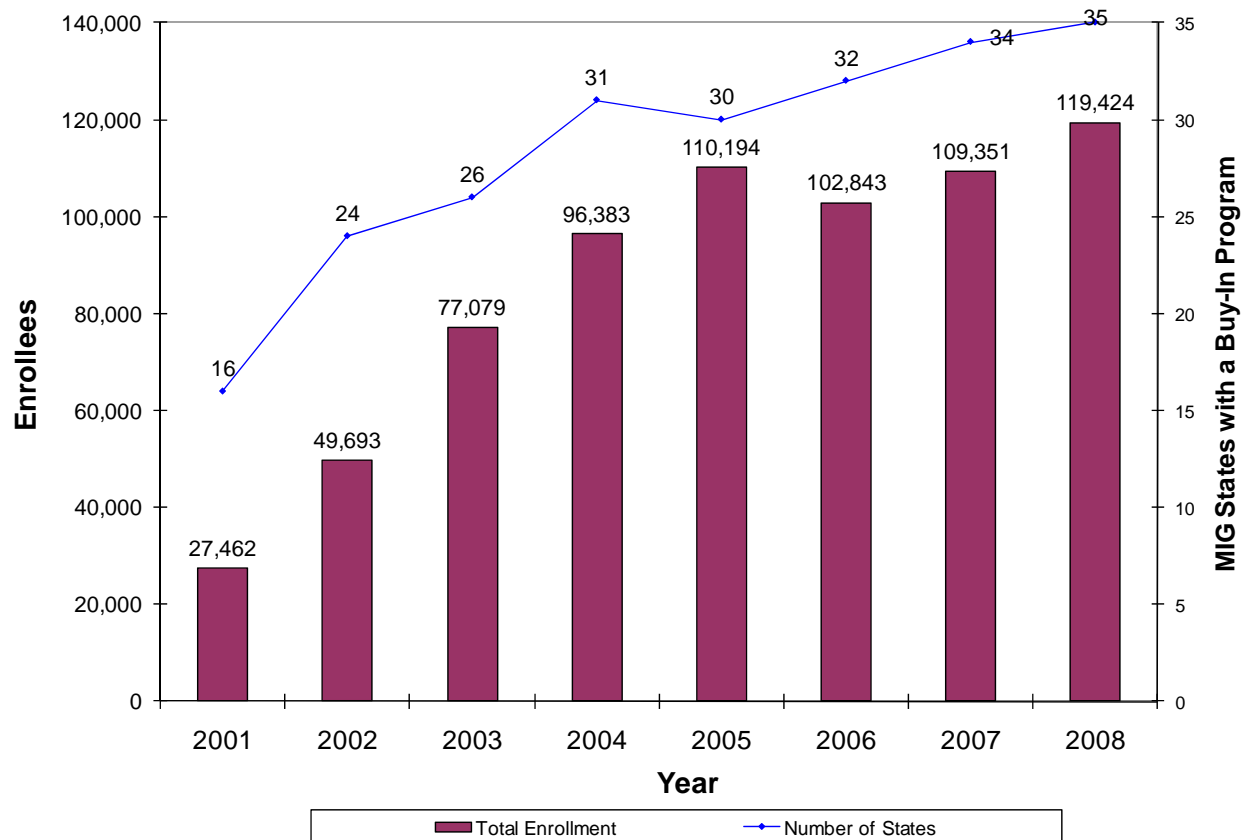
² Five states had MIG funding but no Buy-In program in 2008: Alabama, District of Columbia, Florida, Hawaii, and Montana.

³ This report addresses only Buy-In programs in states with MIG funding because these are the only states required to submit information to CMS on their Buy-In participants. However, several states had a Buy-In program in 2008 but did not have MIG funding, including Georgia, Idaho, Kentucky, Mississippi, Missouri, New York, and South Carolina.

⁴ Enrollment during 2001-2007 may be different from what was reported in last year's GPRA report (Gruman et al. 2008), because updated data are submitted by states every year.

⁵ Appendix A contains additional information about the Buy-In Policy Change Questionnaire.

Figure III.1. Number of MIG States with Medicaid Buy-In Programs and Total Buy-In Enrollment, 2001-2008



Source: 2001-2008 Medicaid Buy-In finder files, and email and telephone communication with CMS staff.

The economic downturn’s effect on the Buy-In program may not yet be apparent in current enrollment figures. Fourteen of the 35 MIG states identified “changes in the availability of jobs and/or payroll hours” as having a potential impact on the Buy-In program in their state during 2008, as compared to only four states that identified this as a problem last year. Some states provided further descriptions of this impact in 2008, for example: it was difficult for enrollees to maintain employment and to find new employment after job loss; a reduction in full-time employment meant reduced access to employer-based health care; participants often reverted to the traditionally disabled category of Medicaid during extended periods of unemployment. Additional states anticipated seeing impacts from the downturn in 2009 and beyond.

B. Changes to State Buy-In Programs

In 2008, some states made changes to their Buy-In programs. Despite an enormous state budget deficit, California was able to turn its Buy-In program into a permanent state program, rather than extending the sunset date. The California legislature determined that, in the long run, the Buy-In program would act as a means to reduce MediCal payments and increase tax revenues.

Some other states increased the annual income and resource limits for Medicaid Buy-In eligibility, changed premium policies, or updated their work verification requirements and definition of employment (see Appendix Table A.1 for state-by-state descriptions of Buy-In programs). Many of these changes were favorable to Buy-In participants. For example:

- Three states (Nebraska, New Hampshire, and Vermont) reported increased income eligibility criteria.
- New Hampshire and Maryland also increased their resource limits.⁶
- Three states modified their premium policies: New Hampshire's premiums increased slightly because they are linked to federal poverty levels, which were updated during the year; Maryland changed the structure by which it charges premiums in order to comply with a CMS directive; and Oregon changed its premium policy to a sliding scale to make premiums more affordable to participants.
- Nebraska increased the frequency of the state Medicaid agency's review of earned income, from six months to three months, and Oregon updated its definition of employment in order to comply with federal law.

C. Medical Expenditures of Buy-In Participants

When compared with other working-age disabled Medicaid enrollees, Buy-In participants in 2005 incurred lower annual Medicaid expenditures (Gimm et al. 2009).⁷ This difference suggests that Buy-In participants who are working may require fewer services or a less expensive mix of services than other disabled Medicaid enrollees. Combined inflation-adjusted Medicaid and Medicare expenditures for Buy-In participants more than doubled, from \$887 million to \$1.9 billion, between 2002 and 2005, as did program enrollment. The average monthly Medicaid cost remained relatively stable over this period, fluctuating between \$1,287 and \$1,161 depending on the year.

It is expected that expenditures will rise as enrollment in the Buy-In program continues to grow; however, much of this spending would not represent a new burden on state Medicaid agencies, because two-thirds of Buy-In participants were enrolled in another Medicaid eligibility category prior to their enrollment in the Buy-In. Medicaid Buy-In appears to be a promising option for states wishing to promote the employment of adults with disabilities without increasing costs (Gimm et al. 2009).

D. Personal Assistance Services

MIG programs appear to have also improved the availability of PAS services in 2008. Every state that applied for MIG funding for 2008 was required to provide PAS for people with

⁶ Maryland increased its resource limit indirectly, by excluding four types of retirement accounts.

⁷ Gimm et al's report analyzes the most recent Medicaid expenditures data, which covers the period 2002-2005.

disabilities in full-time competitive employment.⁸ MIG applications for FY 2008 funding were completed in 2007, which means that PAS improvements were made by the end of the 2007 calendar year. The state's anticipation of this requirement is visible in the movement to higher MIG eligibility categories, where prior to 2008, full eligibility was conditional on PAS offerings: in 2007, nine states moved to full eligibility status, followed by an additional seven states in 2008 (Table B. 4). Only three states (North Carolina, Pennsylvania, and Montana) held no-cost-extension conditional grants in 2008 that were not subject to the same PAS requirements (Table B.3.)

Although most states had already met PAS requirements because of the conditions for eligibility in the grant application process, some continued to improve PAS programs in 2008. Responses to the 2008 MIG Program-Level Questionnaire indicate that seven states developed or modified policies to expand general PAS availability, five states developed or modified policies to expand workplace PAS availability, one state implemented trial programs on PAS service delivery, and six states conducted policy analyses of PAS expansion.⁹

⁸ PAS are defined by the Ticket Act as “a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability.”

⁹ At this time, there is no other reliable way to evaluate PAS programs as a part of MIG performance. Potentially relevant quantitative data, such as Medicaid Claims, are inadequate or of poor quality, and are difficult to analyze across states (GPRA 2007; Liu et al. 2004).

IV. MIG PERFORMANCE: MAXIMIZING EMPLOYMENT AMONG PEOPLE WITH DISABILITIES

A. Earnings Measures of Participation in the Buy-In Program

Although most Buy-In participants had earnings, the economic recession appears to have caused the level of earnings to decrease slightly. Nearly 70 percent of all Buy-In participants had positive earnings in 2008, ranging from 38 percent to 95 percent of participants across the 35 MIG states with Buy-In data (Table B.8).¹⁰ This range and the overall percentage of participants with earnings was roughly the same in 2008 as in 2007. However, all but two states experienced a small decrease from 2007 in the percentage of participants with earnings, with two states experiencing a nearly 20 percentage point drop.

Among participants with earnings, average inflation-adjusted annual earnings were \$8,741 in 2008, ranging from \$4,790 in Wisconsin to \$15,811 in Arkansas (Table B.9).¹¹ They remained below the annualized substantial gainful activity (SGA) level in all but eight of the 35 states, the same number of states as in 2007.¹² Because SGA is used to determine eligibility for federal disability benefits (such as Social Security Disability Insurance, or SSDI), it may be the case that participants who are SSDI beneficiaries—the majority of Buy-In participants—intentionally restricted their earnings below the threshold amount to avoid risking loss of cash benefits. Although national average earnings dropped slightly from 2007, when they were \$8,922, 13 of the 35 states actually saw increases in average earnings among Buy-In participants with positive earnings, a commendable outcome in a tough employment environment.

Buy-In participants' earnings totaled nearly \$709 million in 2008 across all 35 MIG/Buy-In states. This four percent increase since 2007 represents a growing tax base, and is largely due to increased enrollment (Table B.10). Total earnings increased in 21 of the 35 states. This growth has been consistent since the implementation of the MIG program in 2001, underscoring its important contribution to federal and state revenue.

B. Buy-In Premium Collection

Medicaid Buy-In premiums represent an important revenue source to states. The collection of Buy-In premiums in 2008 looked very similar to the previous year. Among states that charged

¹⁰ States differ in their work verification requirements for the Buy-In enrollees. In some states, these figures (based on income data from the Internal Revenue Service) may understate the actual percent of Buy-In participants who are employed, because they may be working in jobs that do not require them to file a tax return (for example, if they earn cash from a casual job, or are workers at sheltered workshops).

¹¹ Consumer Price Index is used for the inflation adjustment. All dollar amounts are in 2008 values.

¹² In 2008, SGA for an individual with a disability other than blindness was \$940 per month, or \$11,280 a year. SGA for a blind individual was \$1,570 per month, or \$18,340 per year. Average inflation-adjusted earnings were greater than annualized SGA in Alaska, Arkansas, Louisiana, Massachusetts, Nevada, Texas, Rhode Island and West Virginia.

premiums to any of their Buy-In participants,¹³ 55 percent of enrollees were charged premiums during the year, although these percentages ranged between 6 and 100 percent across states. (Table B.11). The average premium charged was \$64, and ranged from \$10 to \$157 across states. Although all states are authorized to collect a premium for the Buy-In program, not all states choose to do so. Maryland, Ohio and Texas began to collect premiums in 2008, for a total of 27 states. In total, nearly \$27 million was charged in premiums in 2008, nearly the same as the total amount charged in 2007.

Buy-In premiums can be a significant percentage of an enrollee's earnings, but are low compared to premiums in the private insurance market. According to the 2009 Individual Health Insurance report by America's Health Insurance Plans (AHIP 2009), the average monthly premium for a single, private, non-group health insurance policy is \$249 (though coverage for an individual may be denied due to a pre-existing condition). For a typical Buy-In participant in his/her late 40s who is looking for a comprehensive benefit package with zero deductible and low cost-sharing, the cost can easily double or triple. The Buy-In is of higher value, since PAS and other services important to individuals with disabilities are covered. The Medicaid Buy-In remains an important pathway for workers with disabilities to maintain public health coverage while increasing earnings.

C. Overall Employment Rates of People with Disabilities

Although the employment rate of people with disabilities is slightly higher in MIG states, we cannot determine if the relationship between increased employment and MIG is causal. According to the 2008 American Community Survey (ACS), 10 percent of individuals ages 18-64 had disabilities in 2008; among working age people with disabilities, 39 percent were employed (Table B.12).¹⁴ In 2008, average employment rates for people with disabilities were higher in states that had MIG programs (42 percent) than in non-MIG states (40 percent).¹⁵ This may suggest that MIG activities have been successful in supporting employment for people with disabilities. However, it is not possible to determine whether these differences between MIG and non-MIG states are due to MIG-funded activities or to other systematic differences between states with and without MIG programs.

¹³ Of states with a MIG program and Buy-In in 2008, 27 submitted records regarding the amount of premiums charged to Buy-In participants in 2008. Of the eight states that did not submit data on premiums, Arkansas, New Mexico, North Carolina, South Dakota, Vermont, and Virginia did not have a premium structure in place; and although Michigan and New Jersey did, neither collected premiums from any participant during the year.

¹⁴ It is important to note that in its 2008 questionnaire, the ACS dropped a question on employment disability, and changed wording in other disability-related questions. As a result, the Census advised against making direct comparison between 2008 and earlier data. Nevertheless, Table B.13 provides same information from the 2007 ACS.

¹⁵ These rates are higher than the national average because the ACS included Puerto Rico, which we excluded from our MIG/non-MIG calculations; the employment rate for people with disabilities in Puerto Rico is 24 percent.

D. Employment Rates of People with Disabilities Who Receive Federal Disability Benefits

MIGs may be more likely to affect the employment of people who receive federal disability benefits than the overall rate of employment of people with disabilities. For this reason, states that receive a MIG must annually report the percentage increase (and, by extension, the number) of adults who are working and covered by the SSDI (Title II) or Supplemental Security Income (SSI, Title XVI) programs (Ticket Act 1999). In theory, the MIG-funded initiatives implemented by states should allow for greater workforce participation among working-age beneficiaries with disabilities, making them less dependent on SSDI and SSI.¹⁶

In 2008, the percentage of SSDI beneficiaries who had their benefits withheld or terminated because of a successful return to work varied little by MIG status. In states with a MIG, 1.1 percent of SSDI beneficiaries lost their benefits, as opposed to .97 percent of beneficiaries in states without MIGs (Table B.14). These percentages were unchanged from 2007 (Table B.15). Similarly, there was only a small variation between the percentage of SSI beneficiaries who returned to work in MIG states (7.8 percent) and in states without MIGs (6.0 percent) (Table B.16). This variation between MIG and non-MIG states was the same as in 2007 (Table B.17). In the case of both SSI and SSDI, it may be that MIG states have developed systems that more effectively help beneficiaries return to work, or that there are other systematic differences between states with and without MIGs that encourage work for people with disabilities. However, we cannot assume that there is a causal relationship between MIG funding and the rate at which beneficiaries returned to work.

¹⁶ Although many MIG-funded activities may help those receiving SSI benefits, Title XVI rules typically preclude SSI recipients from participating in the Buy-In program because they are eligible for Medicaid under other provisions.

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V. CONCLUSIONS AND RECOMMENDATIONS

Congress intended that the MIG program would help minimize obstacles to employment for people with disabilities. For the same reasons elaborated in the previous GPRA reports, we do not have the data to fully assess whether the program has been a direct cause of increased earnings and employment among workers with disabilities and higher returns to work. Nevertheless, our findings support the premise that the MIG program is helping workers with disabilities achieve these goals. Perhaps most significantly, returns from the program's investments in research, outreach, program development and other innovative infrastructure have the potential to continue well beyond the scheduled end of the MIG program in 2011. In particular, the Buy-In program has been popular among states, and has recently been shown to be a cost-effective option for providing both health insurance and work incentives to individuals with disabilities (see for example, Hall and Kurth 2009). Other states may follow the lead of California, which in 2008, took steps to make its Buy-In program permanent at the state level.

Research suggests that workers with disabilities are laid off more quickly and hired less frequently than other workers during economic recessions, and they remain jobless for a longer period of time than workers without disabilities (Weathers and Wittenburg 2009), but the full impact of the recent economic downturn on this population is not yet clear. Many states responded to the 2008 Buy-In Policy Change Questionnaire with concerns and observations about the reduced availability of jobs and work hours. To some extent, the adverse effects of the recession have already started to surface, as evidenced by fewer Buy-In participants with positive earnings and, among them, lower average earnings in 2008 compared to 2007. Unfortunately, since the recession deepened in 2009, it is possible that we may find more negative outcomes in next year's report. However, there are also reasons to hope that other infrastructure development supported by MIG funding will mitigate the impact of the economic downturn on the employment of people with disabilities. We will continue to monitor progress in MIG and Buy-In programs through both quantitative and qualitative data collection in 2010.

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APPENDIX A

KEY DATA SOURCES CONSULTED IN PREPARING THIS REPORT

A. Data Sources Used in This Report and in Previous GPRA Reports

A number of data sources have been used across multiple reports. We will describe them briefly here, but note that the 2007 GPRA report (Gruman et al. 2008) provides more detailed information. Medicaid Buy-In finder files provide the enrollment figures for this report. They are collected from each state that has both MIG funding and a Buy-In program. Information about the premium amount charged to Buy-In participants comes from Medicaid Buy-In premium files; states that collected premiums from their enrollees are required to submit information regarding the premium amount charged to Buy-In participants. Descriptions of MIG activities are fed in part by MIG State Quarterly Progress Reports, which all MIG states are required to submit to CMS. Additional information about the levels of MIG activities in various areas comes from the MIG Program-Level Outcome Questionnaire, which has been completed annually by MIG states since 2007. Data on the earnings of Buy-In participants are provided by the Social Security Administration's Master Earnings File. Additional publicly available data from SSA and the American Community Survey are used in this report to demonstrate employment statistics among various populations.

B. New Data Source for 2008 Report: Medicaid Buy-In Policy Change Questionnaire and State Responses

The Buy-In Policy Change Questionnaire has been sent to states for the last three years, building on a smaller-scale request for policy updates that Mathematica sent to states in prior years. Many directors of Medicaid Buy-In programs have found it useful to know about the range of policies and procedures used in other states, so the questionnaire functions to gather this information. The 2008 questionnaire was fielded in fall 2009. All 35 states with a MIG and a Buy-In during 2008 reported on changes to the Buy-In program that have affected enrollment or other outcomes within the program, general changes in Medicaid that might have affected the Buy-In program, and implications of state-level changes and the economic downturn. In addition, states provided explanations for enrollment trends, and updated information about their state's program characteristics. A summary table of states' 2008 Buy-In program characteristics follows.

Table A.1 Selected Characteristics of State Buy-In and Medicaid Programs (Info as of 2008)

	Alaska	Arizona	Arkansas	California
Implementation date	July 1999	January 2003	February 2001	April 2000
Federal authority	BBA	Ticket Act Basic and Medical Improvement	Ticket Act Basic	BBA
Income eligibility	Earned income: Up to 250% FPL for Alaska ^a (includes spousal income). Unearned income must be at or below \$1,156 per month	Up to 250% FPL of earned income (excludes spousal income).	Up to 250% FPL net personal income (earned plus unearned, after SSI income exclusions); unearned income must be less than SSI standard plus \$20. Spousal income not counted.	Up to 250% FPL (includes spousal income, excludes disability-related income, including SSDI benefits)
Individual asset limit	\$10,000 (individual) \$15,000 (couple)	N/A	\$6,000 couple	\$2,000 individual, \$3,000 couple
Medically needy income limit (monthly)	N/A	N/A	\$108	\$600
Income standard for poverty-level Medicaid (monthly)	\$1,156	\$867	N/A	\$1,081 (includes a \$230 disregard)
SSI Benefit (combined federal and state) (monthly)	\$985 ^b	\$637	\$637 (2008)	\$856
1619(b) income threshold (monthly)	\$4,224	\$2,342.83	\$2,199 (2008)	\$2,743
Premium threshold	100% FPL	\$500 of monthly earned income	N/A	Net countable income of \$1
Premium structure	A sliding-scale premium as a fixed percentage of income. The maximum premium is 10% of net family income.	Sliding scale premium not to exceed 2% of net earned income	No premium required. Co-payments higher than those for regular Medicaid are required when income is above 100% FPL.	Sliding-scale premium is based on net countable income. For income from \$1 up to 250% FPL, premiums range from \$20 to \$250 for an individual and \$30 to \$375 for a couple.
Income verification requirements	Eligibility based entirely upon receipt of earned income, which includes spousal income. Not required to demonstrate that income and FICA taxes are being paid.	Must document social security and FICA taxes are being paid	Required to demonstrate that earned income is reported to the IRS (see statement at comment DHS5)	Proof of employment (e.g., pay stubs or written verification from the employer). Self-employed or contractor provides records (e.g., W-2 forms, 1099 IRS form). Not required to demonstrate that income and FICA taxes are being paid.
Work stoppage protection	None	N/A	Up to 6 months given that participant states his/her intention to return to work	If enrollee is out of work "for good cause"—such as being laid-off, a worksite closure, health problems due to the enrollee's disability, or a loss of current transportation with no other means of transportation—a 2-month grace period is granted

^a Federal poverty guidelines for Alaska are higher than those for the 48 contiguous states

^b Alaska provides Medicaid coverage to people with disabilities receiving only the SSI supplement who have countable income up to \$1,156 per month.

	Connecticut	Illinois	Indiana	Iowa
Implementation date	October 2000	January 2002	July 2002	March 2000
Federal authority	Ticket Act Basic and Medical Improvement & BBA (added 10/2006)	Ticket Act Basic	Ticket Act Basic	BBA
Income eligibility	Up to \$75,000 per year (excludes spousal income)	Up to 200% FPL (includes spousal income)	Up to 350% FPL (excludes spousal income)	Up to 250% FPL (includes spousal income)
Individual asset limit	\$10,000 (individual) \$15,000 (couple)	\$10,000 (includes spousal resources)	\$2,000 (excludes spousal resources) \$3,000 (married couple)	\$12,000 (individual) \$13,000 (couple)
Medically needy income limit (monthly)	\$506 effective 7/1/2008	\$283	N/A	\$483
Income standard for poverty-level Medicaid (monthly)	N/A	\$867	N/A	N/A
SSI Benefit (combined federal and state) (monthly)	\$805	Individually budgeted	\$674	\$623
1619(b) income threshold (monthly)	\$4,468	\$2,600	\$2,718	\$1,891
Premium threshold	200% FPL	100% FPL	150% FPL	150% FPL
Premium structure	Premiums equal 10% of total income above 200% FPL	Premium payment categories are calculated based on the sum of 7.5% of unearned and 2% of earned income.	Based on percentage of applicant and spouse's gross income according to family size.	Based on sliding scale premium schedule with 16 premium brackets, ranging from \$28 to \$443. Effective 7/1/08, the premium scale was adjusted. Premiums ranged from \$29 to \$535.
Income verification requirements	Must have payroll taxes, including FICA, taken out of wages, unless self-employed. If self-employed, must provide tax forms or legitimate business records.	Employment must be verified by pay stubs and employer documents that income is subject to income taxes and FICA.	Must have pay stubs and documentation that enrollee is paying income and FICA taxes.	Must have earned income verifiable by pay stubs, completed tax forms, or a signed statement from a person's place of work. Not required to demonstrate that income and FICA taxes are being paid.
Work stoppage protection	Enrollees may continue enrollment for up to 12 months if job loss due to (1) health crisis or (2) involuntary job dismissal and participant intends to return to work. The participant must continue to pay monthly premium based on remaining income.	Up to 90 days if premiums are paid and a letter from a physician is submitted stating that the enrollee is unable to work due to health problems.	Enrollment can continue for up to 1 year after losing employment.	6 months

	Kansas	Louisiana	Maine	Maryland
Implementation date	July 2002	January 2004	August 1999	April 2006
Federal authority	Ticket Act Basic and Medical Improvement	Ticket Act Basic	BBA	Ticket Act Basic
Income eligibility	Up to 300% FPL (includes spousal income)	Up to 250% FPL (excludes spousal income)	Up to 250% FPL on total income, up to 100% FPL on unearned income (includes spousal income)	Up to 300% FPL (includes spousal income)
Individual asset limit	\$15,000 (includes spousal resources)	\$25,000 (excludes spousal resources)	\$12,000 (includes spousal resources)	\$10,000 (includes spousal resources)
Medically needy income limit (monthly)	\$475	\$100	\$381	\$350
Income standard for poverty-level Medicaid (monthly)	N/A	\$623	\$867	\$1,004
SSI benefit (combined federal and state) (monthly)	\$623	\$623	\$637 + \$55 income disregard for state SSI supplement and \$10 state supplemental check	\$637
1619(b) income threshold (monthly)	\$2,488	\$2,190	\$3,428	\$2,997
Premium threshold	100% FPL	150% FPL	150% FPL	100% FPL
Premium structure	16 premium amounts based on income brackets from \$55 to \$152 for individual and \$74 to \$205 for two or more. Cannot exceed 7.5% of income.	\$80 for 150%- 200%, \$110 for 200%-250% FPL	\$10 premium for 150%-200% FPL, \$20 for 200%-250% FPL	Countable income to 100% FPL = \$0 premium; over 100% FPL up to 200% FPL = \$25/month premium; over 200% FPL up to 250% FPL = \$40/month premium; over 250% up to 300% FPL=\$55/month
Income verification requirements	Employment must be verifiable by pay stubs and employer documents that income is subject to FICA taxes.	Required to demonstrate that income and FICA taxes are being paid	Must have earned income. Not required to demonstrate that income and FICA taxes are being paid.	Must have earned income subject to FICA
Work stoppage protection	6 months	Individuals in the Buy-In who lose their jobs can retain their MPP eligibility for up to 6 months provided they intend to return to the workforce.	None	None

	Massachusetts	Michigan	Minnesota	Nebraska
Implementation date	July 1997	January 2004	July 1999	July 1999
Federal authority	1115 Demonstration Waiver	Ticket Act Basic	BBA (prior to Oct 2000), Ticket Act Basic (as of Oct 2000)	BBA
Income eligibility	No limit	Pre-enrollment: Total countable income (earned and unearned) cannot exceed 100% of FPL using the SSI methodology. During enrollment: No limit on earned income, but unearned income cannot exceed 100% of FPL. (excludes spousal income)	No upper income limit. Must have monthly wages or self-employment earnings of more than \$65 (excludes spousal income).	Two-part income test: (1) sum of spouse's earned income and applicant's unearned income must be less than SSI standard (\$637 for individual and \$956 for a couple in 2008) ^a ; (2) countable income up to 250% FPL (includes spousal income)
Individual asset limit	No limit	\$75,000 (excludes spousal resources)	\$20,000 (excludes spousal resources)	\$4,000 for individual and \$6,000 for a couple
Medically needy income limit (monthly)	N/A ^a	\$350	\$851 January – July \$867 July-December (People with income over 100% FPL must spend down to 75% FPL.)	\$867 for individual and \$1,167 for a couple
Income standard for poverty-level Medicaid (monthly)	The income standards are variable depending on the population, ranging from 100% to 200% FPL (\$797 to \$1,595 for a family of one)	\$903	\$851 January – July \$867 July – December	\$392
SSI Benefit (combined federal and state) (monthly)	\$693	\$688 (Includes \$674 federal and \$14 state supplement)	\$698	\$637 or \$956
1619(b) income threshold (monthly)	\$2,649	\$2,304	\$3,733.25	\$2,751.25
Premium threshold	100% FPL	250% FPL (Using SSI methodology)	All enrollees must pay a minimum premium of \$35.	200% FPL
Premium structure	Premiums based on two different sliding scales—one for enrollees with other health coverage, one for enrollees without it. Premiums begin at 100% FPL and increase in increments of \$5 to \$16 based on 10% increments of the FPL.	Based on sliding scale ranging from \$50 to \$920 per month.	Premiums based on a minimum of \$35 or a sliding fee scale based on income and household size. The premium gradually increases to 7.5% of income at or above 300% of FPL. Must also pay 0.5 percent of unearned income. No maximum premium amount.	Sliding scale based on income ranging from 2% of income if income is from 200% to 210% of FPL to 10% of income if income is from 240% to 250% of FPL.
Income verification requirements	Demonstrate at least 40 hours of work per month.	Must be employed on a regular and continuing basis. Not required to demonstrate the income or FICA tax payment.	Earned monthly income above \$65. Required to demonstrate that FICA taxes are being paid.	Must have earned income based on pay stubs, employer forms, or tax returns. Not required to demonstrate that income and FICA taxes are being paid.

	Massachusetts	Michigan	Minnesota	Nebraska
Work stoppage protection	Up to 3 months if participant maintains premium payments. Eligibility is re-determined when the participant reports job loss.	Up to 24 months if the result of an involuntary layoff or determined to be medically necessary	Up to 4 months if no earned income due to medical condition or involuntary job loss.	

^a Massachusetts is unique in that, rather than have a medically needy or spend down program as many other states do, all persons with disabilities who are not eligible for the working benefit plan of CommonHealth (the state's Buy-In program) are eligible for the non-working benefit plan, which requires that participants meet a one-time deductible to receive coverage.

^b Massachusetts covers nonworking people with disabilities with incomes at or below 133 percent of the FPL through its Section 1115 demonstration waiver.

^c In Nebraska, the applicant's unearned income is disregarded if he or she is in an SSDI trial work period.

	Nevada	New Hampshire	New Jersey	New Mexico
Implementation date	July 2004	February 2002	February 2000	January 2001
Federal authority	Ticket Act Basic	Ticket Act Basic	Ticket Act Basic	BBA
Income eligibility	Up to 250% FPL on earned income and \$699 unearned income	Up to 450% FPL on earned income (includes spousal income)	Up to 250% FPL on earned income; up to 100% FPL on unearned income disregarding SSDI benefits received under individual's account (SSN, not survivor's SSN)	Up to 250% FPL on earned income and up to \$1,226/month on unearned income (includes spousal income). Must earn at least \$970 per quarter.
Individual asset limit	\$15,000 (excludes spousal resources)	\$24,076 for individual \$36,114 for a married couple	\$20,000 (excludes spousal resources)	\$10,000 (excludes spousal resources)
Medically needy income limit (monthly)	N/A	\$591	\$367	N/A
Income standard for poverty-level Medicaid (monthly)	\$1,060	N/A	\$903 (individual) \$1,215 (couple)	N/A
SSI benefit (combined federal and state) (monthly)	\$637	\$651	\$705.25 (individual) \$1,036.36 (couple)	\$637(individual) \$956 (couple)
1619(b) income threshold (monthly)	\$2,488	\$3,227	\$2,679	\$2,512
Premium threshold	All enrollees pay at least 5%	150% FPL	150% FPL	Not applicable
Premium structure	Enrollees who earn a monthly net income \$1,701 or less pay 5% of income. Those earning more than \$1,701 (up to \$2,127) pay 7.5% of income.	6 brackets from \$98 to \$260 for individuals. Individuals with gross income (spousal included) that exceeds \$75,000 are required to pay the full premium.	Flat rate ^a \$25 individual \$50 couple	No premium required. Co-payments higher than those for regular Medicaid are required at all income levels; clients' responsibility to keep track of co-payments
Income verification requirements	Must provide proof of employment (pay stub) or self-employment (tax return).	Must be employed (proven with a pay stub or 1099 estimated tax statement for self-employment). Must demonstrate that appropriate FICA contributions are being made. Must not be earning less than the hourly federal minimum wage.	Be employed full or part time. Not required to demonstrate that income and FICA taxes are being paid.	Show that the applicant earned or expects to earn sufficient wages in calendar quarter to count toward Social Security coverage (\$970 in a quarter in 2006). ^b Proof of income or FICA tax payment is required.
Work stoppage protection	Three months, as long as premiums continue to be paid.	6 months with a possible subsequent 6-month grace period if the individual demonstrates medical necessity or has documentation of a proven job search to employers.	Up to 26 weeks if the person has employer-paid sick leave, worker's compensation or Temporary Disability Insurance and intends to return to work	None

^a New Jersey does not collect premiums because the revenue would be insufficient to offset the administrative costs.

^b New Mexico waives its work requirement for SSDI recipients in the two-year waiting period for Medicare.

	North Carolina	North Dakota	Ohio	Oregon
	The following additions provide information for the initial enrolled group (those with income up to 150% FPL) as well as for the entire program as planned			
Implementation date	November 2008	June 2004	April 2008	February 1999
Federal authority	Ticket Act Basic and Medical Improvement	Ticket Act Basic	Ticket Act Basic and Medical Improvement	BBA
Income eligibility	150% FPL/none	Up to 225% FPL (excludes spousal income)	Up to 250% FPL (excludes spousal income). (Countable income limit is 250% FPL. Income above FPL is disregarded up to \$20,000.)	Up to 250% FPL on adjusted earned income (excludes spousal income)
Individual asset limit	\$20,880 (includes spousal resources)	\$13,000 (includes spousal resources)	\$10,000 (includes spousal resources)	\$5,000 (excludes spousal resources)
Medically needy income limit (monthly)	\$161 individual, \$211 couple	\$500		N/A
Income standard for poverty-level Medicaid (monthly)	\$903 individual, \$1,215 couple	N/A		
SSI Benefit (combined federal and state) (monthly)	\$639 individual, \$956 couple	\$623		\$638.70 (includes a \$1.70 state supplement) ^a
1619(b) income threshold (monthly)	\$1,734 individual, \$2,334 couple	\$2,747		\$2,469.83
Premium threshold	No premium/ 200% FPL	All participants are required to pay a premium	150% FPL	\$651
Premium structure	Annual enrollment fee and premium. Premiums based on a sliding scale.	5% of an individual's gross income	Premium charged is 10% of the difference between 150% FPL and total income.	"Premium based on sliding scale"
Income verification requirements	May verify earned income with a letter from an employer or a pay stub. If self employed, must show evidence of paid FICA taxes or a set of books.	May verify earned income with a letter from an employer or a pay stub. Not required to demonstrate that income or FICA taxes are being paid.		Required to demonstrate that FICA or SECA taxes are being paid. Participants who are self-employed but have not yet filed or paid SECA payments can be asked to produce clear and convincing evidence of self-employment in order to be considered employed

	North Carolina	North Dakota	Ohio	Oregon
Work stoppage protection	If involuntary loss of employment, can maintain enrollment up to 12 months.			Participants remains "engaged in employment" while not working if the employer treats the client as an employee, such as when the client is absent from the job under the provisions of the Family Medical Leave Act.

^aOnly the participant's income is counted if spousal income is less than half of the SSI standard.

	Pennsylvania	Rhode Island	South Dakota	Texas
Implementation date	January 2002	January 2006	October 2006	September 2008
Federal authority	Ticket Act Basic and Medical Improvement	BBA	BBA	BBA
Income eligibility	Up to 250% FPL (includes spousal income)	Up to 250% FPL (excludes spousal income)	Up to 250% FPL (excludes spousal income)	Up to 250% FPL (excludes spousal income; income pretest : must demonstrate earnings of \$1,050 per qualifying quarter)
Individual asset limit	\$10,000 (includes spousal resources)	\$10,000 (individual) \$20,000 (couple)	\$8,000 (excludes spousal resources)	\$5,000 (excludes spouse)
Medically needy income limit (monthly)	\$425	\$753	N/A	
Income standard for poverty-level Medicaid (monthly)	\$867 plus \$20 disregard (individual) \$1,167 plus \$20 disregard (couple)	\$850.83 plus \$20 disregard (individual) \$1,140.83 plus \$20 disregard (couple)		
SSI Benefit (combined federal and state) (monthly)	\$664.40	\$660.35	\$637	
1619(b) income threshold (monthly)	\$2,167 (after all allowable deductions)	\$2768	\$2,652	\$2363
Premium threshold	All participants pay a premium 5% of countable income. Premiums of less than \$10 are waived.	100% FPL	N/A	150% FPL of earned income
Premium structure	All participants pay a premium 5% of countable income. Premiums of less than \$10 are waived.	Dollar for dollar over \$753 for an individual	No premium is required.	All unearned income above SSI federal benefit rate (\$637 in 2008; premium is \$20-\$40/month depending on FPL category of earned income)
Income verification requirements	Must provide verification of earned income. Not required to demonstrate that income and FICA taxes are being paid.	Must provide verification of earned income. Not required to demonstrate that income and FICA taxes are being paid.	Must provide verification of earned income and demonstrate that income and FICA taxes are being paid.	Must provide verification of unearned and earned income and demonstrate that income and FICA taxes are being paid.
Work stoppage protection	May remain in program for up to 2 months if unable to work due to job loss or health problems. Can be extended for 2 additional months if actively seeking employment.	May remain in program and have premium waived for up to 4 months if unable to work due to job loss or health problems.	Enrollment may continue for 3 months if enrollee is unable to verify employment.	

	Utah	Vermont	Virginia	Washington
Implementation date	June 2001	January 2000	January 2007	January 2002
Federal authority	BBA	BBA	TWWIIA Basic	Ticket Act Basic and Medical Improvement
Income eligibility	Up to 250% FPL (includes spousal income).	Two-part test for family income: (1) Income less than 250% FPL, (2) Income does not exceed either the Medicaid protected income level for one, or the SSI/AABD payment level for two, whichever is higher, after disregarding the earnings, SSDI benefits, and any veteran's disability benefits of the individual working with disabilities.	Up to 80% FPL (includes spousal income)	220% FPL (includes spousal income) ^a
Individual asset limit	\$15,000 (includes spousal resources)	\$5,000 (individual) \$6,000 (couple) Disregards assets accumulated from earnings since enrollment	\$2,000 (\$3,000 for a couple)	No limit
Medically needy income limit (monthly)	\$817	\$883		\$674
Income standard for poverty-level Medicaid (monthly)	\$817	N/A		N/A
SSI Benefit (combined federal and state) (monthly)	\$603	\$689.04		\$674 Ranges from \$637.54 to \$836.77, depending upon the federal Minimum Income Level.
1619(b) income threshold (monthly)	\$2,193	\$3,017	\$2,298	\$2,262
Premium threshold	100% FPL	N/A	N/A	\$65 earned income and/or \$637 unearned income
Premium structure	100%-110% FPL: 5% premium charged 110%-120% FPL: 10% premium charged Over 120% FPL: 15% premium charged	Premium eliminated in June 2004.	No premiums charged at this time.	The lesser of (1) 7.5% total income or (2) a total of the following: 50% unearned income above MNIL plus 5% total unearned income plus 2.5% earned income after deducting \$65
Income verification requirements	For wage employment, worker must demonstrate that FICA taxes are being paid. For self-employment, worker must have a tax return or business plan.	Earnings of the working individual with disabilities shall be documented by evidence of FICA tax payments, Self-employment Contributions Act tax payments, or a written business plan approved and supported by a third-party investor or funding source.	The individual must receive minimum wage or the prevailing wage/"going rate" in the community and must provide documentation that payroll taxes are withheld. Self-employment must be documented through federal income tax return, business records. The individual's signed allegation is acceptable if no other evidence can be obtained	Enrollees may continue enrollment through current certification period if job loss due to (1) health crisis or (2) involuntary job dismissal and participant intends to return to work. The participant must continue to pay the monthly premium based on remaining income.

	Utah	Vermont	Virginia	Washington
Work stoppage protection	None	None	If the individual is unable to maintain employment due to illness or unavoidable job loss, he/she may remain in MEDICAID WORKS for up to 6 months as long as any required premium payments continue to be made.	

^a Wisconsin limits the duration and frequency (twice in a 5-year period) of enrollment in employment counseling.	West Virginia	West Virginia	Wisconsin	Wyoming
Implementation date	May 2004	May 2004	March 2000	July 2002
Federal authority	Ticket Act Basic and Medical Improvement	Ticket Act Basic and Medical Improvement	BBA	Ticket Act Basic
Income eligibility	Up to 250% FPL, unearned income must be equal to or less than SSI benefit plus \$20 (excludes spousal income)	Up to 250% FPL, unearned income must be equal to or less than SSI benefit plus \$20 (excludes spousal income)	Up to 250% FPL (includes spousal income)	\$1,869 (applicant gross countable income only)
Individual asset limit	\$2,000 (\$5,000 liquid asset exclusion)	\$2,000 (\$5,000 liquid asset exclusion)	\$15,000 (excludes spousal resources)	None
Medically needy income limit (monthly)	\$200	\$200	\$592	N/A
Income standard for poverty-level Medicaid (monthly)	N/A	N/A	N/A	N/A
SSI Benefit (combined federal and state) (monthly)	\$637	\$623	\$683	\$623.00
1619(b) income threshold (monthly)	\$2,263	\$2,120	\$2,493	N/A
Premium threshold	All enrollees must pay a minimum premium of \$15	All enrollees must pay a minimum premium of \$15	150% FPL	All participants pay a premium
Premium structure	Premiums are 3.5% of monthly gross income with a \$15 minimum amount. Enrollees must also pay an enrollment fee of \$50, which includes the first month's premium.	Premiums are 3.5% of monthly gross income with a \$15 minimum amount. Enrollees must also pay an enrollment fee of \$50, which includes the first month's premium.	Equal to the sum of (1) 3% of an individual's earned income, and (2) 100% of unearned income minus certain needs and expenses and other disregards. If the second calculation is less than \$25, this component of the premium is \$0.	Premiums are 7.5 % of gross monthly income, less a \$50 deduction from the unearned income.
Income verification requirements	Must be employed and earning at least the federal minimum wage. Not required to demonstrate that income or FICA taxes are being paid. May verify earned income with a letter from an employer or a pay stub.	Must be employed and earning at least the minimum wage. Not required to demonstrate that income or FICA taxes are being paid.	Required to either work or participate in an employment counseling program, which one can do for up to a year. Not required to demonstrate that income and FICA taxes are being paid.	Must be employed. No requirement to earn a certain amount of income or work a minimum number of hours each month. Verification of employment must be obtained.
Work stoppage protection	Coverage can continue for up to 6 months after an involuntary loss of employment if participant continues to pay premiums and show proof of job search efforts.			No.

DEFINITIONS OF TERMS IN TABLE A.1

Category	Description
Income eligibility	This information describes how much income a program participant is allowed to have in each state. Income eligibility is presented as a percentage of the federal poverty line (FPL). The table also indicates whether the state counts spousal income when determining Medicaid Buy-In eligibility.
Resource limit	This is the maximum level of resources that a participant can accumulate and remain eligible for the Buy-In program.
Medically needy income limit	This is the maximum amount of income a person may have to be eligible for the medically needy or spend down program; one means for persons with disabilities to obtain Medicaid coverage. If a person’s income is above this limit, he or she must spend down until his or her income is below it to become eligible for Medicaid through the medically needy program. We present the monthly limit for an unmarried person with disabilities
Income standard for other categorical Medicaid	This is the income threshold below which an individual with disabilities is categorically eligible for Medicaid. We present the monthly income threshold for an unmarried person with disabilities to qualify for categorical Medicaid eligibility (for example, the poverty-level option).
SSI benefit (combined state and federal)	SSI benefit (combined state and federal) is the total amount of cash benefits that an SSI recipient receives from the federal and state governments. The monthly combined federal and state SSI benefit is for an unmarried person with disabilities.
Premium threshold	This is the income level above which Buy-In participants are required to pay a premium.
Premium structure	This determines who pays a premium, how much each participant pays, and how premiums are graded across different income brackets.
Income verification requirements	This describes the procedures for verifying participants’ income.
Work stoppage protection	These provisions allow a person with disabilities to remain enrolled in the Buy-In program without earnings.

APPENDIX B

**STATE-LEVEL ANALYSES OF MIG
PERFORMANCE**

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Table B.1: MIG Eligibility Categories and Personal Assistance Services (PAS) Requirements, 2001-2008

Eligibility Category	Funding Years Available	Grant Type/ Names ^a	PAS Requirements Necessary to Secure Grant Type
Full	2001-2005	Full	State that offer PAS statewide within and outside the home to the extent necessary to enable an individual to be engaged in full-time competitive employment. States must offer PAS statewide through optional Medicaid personal care services benefit under the state Medicaid plan, a section 1115 or 1915(c) waiver and/or a 1915(b) waiver, or a combination of the above.
	2005-present	Basic	
	2005-present	Comprehensive	
Conditional	2001-2006 ^b	Conditional	States that do not meet full eligibility criteria but have statewide PAS of limited scope capable of serving people with disabilities engaged in competitive employment of at least 40 hours per month. In addition, states that commit to the improvements necessary to reach this level of service by the last day of the first full year of funding may also apply under this category.
Transitional	2001-2002 ^b	Transitional	States that offer PAS sufficient to support individuals engaged in competitive employment of at least 40 hours per month, but either not in a statewide manner or not outside the home.
Reserved	2001-2003 ^b	Reserved	States that do not qualify for full or conditional eligibility (those that do not have and cannot commit to the development of a sufficient personal assistance service system) may still apply and have first- or second-year funds reserved for them, contingent upon later passage and implementation of coverage for PAS capable of serving people with disabilities in competitive employment of at least 40 hours per month.

Source: 2001-2008 MIG Solicitations; email and telephone communication with CMS staff.

Note: PAS requirements for particular grant types were taken from the MIG solicitation in the most recent year the grant was available. In other words, PAS requirements for reserved and transitional grants were taken from the 2003 MIG solicitation, conditional grants from the 2006 solicitation, and basic/comprehensive grants from the 2008 solicitation.

^a Note that while the eligibility categories and requirements for each category have remained the same since 2001, the types/names of grants within each eligibility category have changed. That is, fully eligible states have been offered full, basic, and comprehensive grants, but the grants have different names.

^b As shown in Tables B.1 and B.2, states had these types of grants beyond the years they were described in the solicitation because of continuation and no-cost extension grants.

Table B.2: Total Number of MIGs by Type and Year, 2001-2008

Type of MIG ^a	2001	2002	2003	2004	2005	2006	2007	2008
New								
Reserved	2	0	0	0	0	0	0	0
Transitional	6	8	0	0	0	0	0	0
Conditional	7	5	5	0	11	7	0	0
Full	10	2	0	0	0	0	0	0
Basic	0	0	0	0	3	2	6	9
Comprehensive	0	0	0	1	10	3	4	0
Continuation ^b								
Reserved	0	2	2	2	2	1	0	0
Transitional	0	3	9	9	4	0	0	0
Conditional	0	7	11	17	8	15	12	3
Full	0	10	11	10	1	1	0	0
Basic	0	0	0	0	0	3	5	12
Comprehensive	0	0	0	0	1	11	14	16
Total	25	37	38	39	40	43	41	40

Source: Email and telephone communication with CMS staff.

^a The type of MIG for which a state is eligible depends on the availability of PAS in the state; see Table B.3. The type of MIG a state receives determines the amount of available funding and the types of activities that can be supported (2001-2008 MIG Solicitations).

^b Continuation numbers include no-cost extensions.

Table B.3: MIG Awards by State, Year, and Type of Award, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	New Reserved \$625,000	Continuation Reserved \$500,000	Continuation Reserved \$500,000	Continuation Reserved \$500,000	No-cost extension Reserved –	New Conditional \$500,000	Continuation Conditional \$500,000	New Basic \$500,000
Alaska	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	No-cost extension Full –	New Comprehensive \$550,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000
Arizona							New Basic \$500,000	Continuation Basic \$500,000
Arkansas					New Conditional \$550,000	Continuation Conditional \$494,950	No-cost extension Conditional –	New Basic \$500,000
California		New Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	New Comprehensive \$712,956	Continuation Comprehensive \$1,386,318	Continuation Comprehensive \$2,100,000	Continuation Comprehensive \$2,900,000
Colorado		New Transitional \$500,000						
Connecticut	New Conditional \$625,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional –	New Conditional \$724,127	New Comprehensive \$1,511,013	Continuation Comprehensive \$5,120,550	Continuation Comprehensive \$5,529,515
Delaware		New Transitional \$500,000	Continuation Transitional \$500,000	No-cost extension Transitional –				
District of Columbia	New Reserved \$500,000	Continuation Reserved \$500,000	Continuation Reserved \$500,000	Continuation Reserved \$500,000	Continuation Reserved \$400,860	No-cost extension Reserved –	New Basic \$500,000	Continuation Basic \$500,000
Florida						New Conditional \$500,000	Continuation Conditional \$500,000	New Basic \$650,000

Table B.1 (continued)

State	2001	2002	2003	2004	2005	2006	2007	2008
Georgia	New Transitional \$625,000	Continuation Transitional \$500,000						
Hawaii					New Conditional \$500,000	Continuation Conditional \$500,000	New Basic \$500,000	Continuation Basic \$500,000
Idaho	New Full \$625,000	Continuation Full \$500,000						
Illinois	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	New Conditional \$600,000	Continuation Conditional \$500,000	New Comprehensive \$500,000	No cost extension Basic
Indiana			New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$700,000	Continuation Conditional \$500,000	No-cost extension Conditional -	New Basic \$750,000
Iowa	New Transitional \$1,046,750	New Conditional \$1,296,000	Continuation Conditional \$1,458,200	No-cost extension Conditional -	New Conditional \$913,272	Continuation Conditional \$96,728	No-cost extension Conditional -	New Basic \$722,500
Kansas	New Conditional \$529,117	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$600,000	Continuation Conditional \$500,000	New Comprehensive \$1,000,000	Continuation Comprehensive \$686,160
Kentucky					New Conditional \$500,000	No-cost extension Conditional -		
Louisiana		New Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$600,000	New Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000
Maine	New Conditional \$582,963	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	New Comprehensive \$600,000	Continuation Comprehensive \$650,000	Continuation Comprehensive \$650,000	Continuation Comprehensive \$625,000
Maryland			New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$25,440	Continuation Conditional \$350,000	New Basic \$500,000	Continuation Basic \$650,000

State	2001	2002	2003	2004	2005	2006	2007	2008
Massachusetts	New Full \$1,231,807	Continuation Full \$990,891	Continuation Full \$1,044,778	New Comprehensive \$500,000	Continuation Comprehensive \$1,656,368	Continuation Comprehensive \$2,069,699	Continuation Comprehensive \$1,964,130	Continuation Comprehensive \$3,778,321
Michigan					New Conditional \$550,000	Continuation Conditional \$500,000	New Basic \$500,000	Continuation Basic \$712,000
Minnesota	New Full \$1,250,000	Continuation Full \$1,500,000	Continuation Full \$1,500,000	Continuation Full \$566,293	New Comprehensive \$2,137,692	Continuation Comprehensive \$1,937,692	Continuation Comprehensive \$2,682,103	Continuation Comprehensive \$2,682,620
Mississippi			New Conditional \$500,000	No-cost extension Conditional –				
Missouri	New Transitional \$625,000	New Conditional \$1,500,000	Continuation Conditional \$825,000	No-cost extension Conditional –	New Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional –	
Montana						New Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional
Nebraska	New Transitional \$625,000	New Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	New Basic \$550,000	Continuation Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000
Nevada	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	New Basic \$550,000	Continuation Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000
New Hampshire	New Conditional \$625,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$1,385,041	New Conditional \$650,000	Continuation Conditional \$500,000	New Comprehensive \$771,045	Continuation Comprehensive \$2,102,912
New Jersey	New Conditional \$625,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional –	New Conditional \$650,000	Continuation Conditional \$500,000	New Comprehensive \$500,000	Continuation Comprehensive \$500,000

State	2001	2002	2003	2004	2005	2006	2007	2008
New Mexico	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$499,575	New Comprehensive \$1,0854,334	Continuation Comprehensive \$732,193	Continuation Comprehensive \$994,966	Continuation Comprehensive \$500,000
New York		New Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$311,689	No-cost extension Full -		
North Carolina			New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$349,339	Continuation Conditional \$500,000	No-cost extension Conditional -	No cost extension Conditional
North Dakota		New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$569,177	New Comprehensive \$500,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000
Ohio		New Conditional \$500,000		Continuation Conditional \$500,000	Continuation Conditional \$286,416	New Conditional \$500,000	Continuation Conditional \$500,000	New Basic \$500,000
Oklahoma		New Transitional \$500,000	Continuation Transitional \$124,283	Continuation Transitional \$500,000	Continuation Transitional \$45,053			
Oregon	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	New Comprehensive \$600,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$648,563
Pennsylvania		New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$446,470	New Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional
Rhode Island	New Conditional \$625,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	No-cost extension Conditional -	New Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000
South Carolina			New Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$299,647	Continuation Conditional \$500,000	No-cost extension Conditional -	

State	2001	2002	2003	2004	2005	2006	2007	2008
South Dakota		New Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	New Basic \$500,000	Continuation Basic \$500,000	Continuation Basic \$500,000
Texas		New Transitional \$500,000	Continuation Transitional \$500,000	No-cost extension Transitional –				New Basic \$500,000
Utah	New Transitional \$625,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	New Comprehensive \$600,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000
Vermont	New Conditional \$625,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	Continuation Conditional \$500,000	New Comprehensive \$600,000	Continuation Comprehensive \$600,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$530,000
Virgin Islands						New Conditional \$500,000		
Virginia		New Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	New Conditional \$500,000	Continuation Conditional \$500,000	New Basic \$500,000
Washington	New Full \$625,000	Continuation Full \$500,000	Continuation Full \$500,000	Continuation Full \$500,000	New Comprehensive \$600,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000	New Basic \$500,000
West Virginia	New Transitional \$625,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000	Continuation Transitional \$500,000		New Comprehensive \$500,000	Continuation Comprehensive \$500,000	Continuation Comprehensive \$500,000
Wisconsin	New Full \$598,720	Continuation Full \$500,000	Continuation Full \$732,747	Continuation Full \$1,494,271	New Comprehensive \$2,557,057	Continuation Comprehensive \$3,844,806	Continuation Comprehensive \$5,778,535	Continuation Comprehensive \$6,747,000
Wyoming					New Conditional \$550,000	Continuation Conditional \$500,000	New Basic \$500,000	Continuation Basic \$500,000

Source: Email and telephone communication with CMS staff.

Legend: pink = reserved grants orange = transitional grants yellow = conditional grants
 gray = full grants blue = basic grants green = comprehensive grants

Table B4: States that Moved to a Higher MIG Eligibility Category Between 2001 and 2008

State	Eligibility Transition Type	First Year of Higher Eligibility
Alabama	Reserved to conditional	2006
	Conditional to full (basic)	2008
Arkansas	Conditional to full (basic)	2008
California	Transitional to full (comprehensive)	2005
Connecticut	Conditional to full (comprehensive)	2006
District of Columbia	Reserved to full (basic)	2007
Florida	Conditional to full (basic)	2008
Hawaii	Conditional to full (basic)	2007
Illinois ^a	Conditional to full (basic)	2007
Indiana	Conditional to full (basic)	2008
Iowa	Transitional to conditional	2002
	Conditional to full (basic)	2008
Kansas	Conditional to full (comprehensive)	2007
Louisiana	Transitional to full (basic)	2006
Maine	Conditional to full (comprehensive)	2005
Maryland	Conditional to full (basic)	2007
Michigan	Conditional to full (basic)	2007
Nebraska	Transitional to full	2002
New Hampshire	Conditional to full (comprehensive)	2007
New Jersey	Conditional to full (comprehensive)	2007
North Dakota	Conditional to full (comprehensive)	2006
Ohio	Conditional to full (basic)	2008
Rhode Island	Conditional to full (basic)	2005
South Dakota	Transitional to full (basic)	2006
Utah	Transitional to full (comprehensive)	2005
Vermont	Conditional to full (comprehensive)	2005
Virginia	Transitional to conditional	2006
	Conditional to full (basic)	2008
West Virginia	Transitional to full (comprehensive)	2006
Wyoming	Conditional to full (basic)	2007

Source: 2001-2008 MIG Solicitations; email and telephone communication with CMS staff.

^a Although Illinois was fully eligible upon receiving its first MIG in 2001, it had only conditional eligibility from 2005-2006. It reestablished full eligibility in 2007.

Table B.5: Legislative Authority and Initial Implementation Dates of MIG States with a Buy-In Program Between 2001 and 2008

State	Year of Implementation	Initial Legislation that Started the Buy-In	Total Ever Enrolled Between Initial Implementation and December 31, 2008 ^a
Alabama	–		
Alaska	July 1999	Balanced Budget Act of 1997	1,108
Arizona	January 2003	Ticket Act Basic and Medical Improvement	2,263
Arkansas	February 2001	Ticket Act Basic	463
California	April 2000	Balanced Budget Act of 1997	9,761
Colorado	–	–	–
Connecticut	October 2000	Ticket Act Basic and Medical Improvement & BBA (added 10/2006)	11,738
Delaware	–	–	–
District of Columbia	–	–	–
Florida	–	–	–
Georgia	–	–	–
Hawaii	–	–	–
Idaho	–	–	–
Illinois	January 2002	Ticket Act Basic	1,990
Indiana	July 2002	Ticket Act Basic	20,450
Iowa	March 2000	Balanced Budget Act of 1997	22,027
Kansas	July 2002	Ticket Act Basic and Medical Improvement	2,395
Kentucky	–	–	–
Louisiana	January 2004	Ticket Act Basic	2,783
Maine	August 1999	Balanced Budget Act of 1997	4,229
Maryland	April 2006	Section 1115 Waiver (prior to Sept 2008) (Ticket Act Basic (as of Oct 2008) ,	474
Massachusetts	July 1997	Section 1115 Waiver	41,033
Michigan	January 2004	Ticket Act Basic	2,712
Minnesota	July 1999	BBA (prior to Oct 2000), Ticket Act Basic (as of Oct 2000)	19,096
Mississippi	–	–	–
Missouri (new)	August 2007	Ticket Act Basic and Medical Improvement	469
Missouri (old)	July 2002	Ticket Act Basic	26,793
Montana	–	–	–
Nebraska	July 1999	Balanced Budget Act of 1997	626
Nevada	July 2004	Ticket Act Basic	69
New Hampshire	February 2002	Ticket Act Basic	4,729
New Jersey	February 2000	Ticket Act Basic	5,484

State	Year of Implementation	Initial Legislation that Started the Buy-In	Total Ever Enrolled Between Initial Implementation and December 31, 2008 ^a
New Mexico	January 2001	Balanced Budget Act of 1997	4,110
New York	July 2003	Ticket Act Basic and Medical Improvement	10,739
North Carolina	November 2008	Ticket Act Basic and Medical Improvement	156
North Dakota	June 2004	Ticket Act Basic	795
Ohio	April 2008	Ticket Act Basic and Medical Improvement	2,702
Oklahoma	–	–	–
Oregon	February 1999	Balanced Budget Act of 1997	2,370
Pennsylvania	January 2002	Ticket Act Basic and Medical Improvement	21,821
Rhode Island	January 2006	Balanced Budget Act of 1997	41
South Carolina	October 1998	Balanced Budget Act of 1997	207
South Dakota	October 2006	Balanced Budget Act of 1997	148
Texas	September 2008	Balanced Budget Act of 1997	78
Utah	June 2001	Balanced Budget Act of 1997	3,543
Vermont	January 2000	Balanced Budget Act of 1997	2,470
Virgin Islands	–	–	–
Virginia	January 2007	TWWIIA Basic	29
Washington	January 2002	Ticket Act Basic and Medical Improvement	2,491
West Virginia	May 2004	Ticket Act Basic and Medical Improvement	1,397
Wisconsin	March 2000	Balanced Budget Act of 1997	23,870
Wyoming	July 2002	Ticket Act Basic	105

Source: Medicaid Buy-In Policy Change Questionnaire, October 2009; Buy-In finder files.

Note: Cells with “–” denote states that have never had a Buy-In. Missouri discontinued its first Buy-In program in August 2005 but started a new program in 2007.

^a The total ever enrolled across all years includes the number of participants in all years of the state’s Buy-In program, even if the program started before the state received a MIG. For example, Massachusetts started its Buy-In program in 1997, so the total ever enrolled for that state includes individuals enrolled at any point since 1997; however, the annual enrollment information is only shown for 2001-2008.

Table B.6: Total Number Ever Enrolled in Buy-In Programs, by MIG State, by Year, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alaska	179	253	308	350	358	360	367	387
Arizona							1,342	1,471
Arkansas					70	126	171	166
California		953	1,191	1,631	2,552	4,143	5,130	5,621
Colorado	–							
Connecticut	2,619	3,470	3,798	4,273	5,051	5,611	6,175	6,573
Delaware	–	–	–					
District of Columbia	–	–	–	–	–	–	–	–
Florida						–	–	–
Georgia	–							
Hawaii					–	–	–	–
Idaho	–							
Illinois	–	379	685	877	1,024	976	928	852
Indiana			7,839	9,377	9,882	8,836	8,329	7,299
Iowa	4,107	5,898	7,539	9,406	11,208	12,601	13,374	14,213
Kansas	–	511	832	1,026	1,230	1,279	1,320	1,373
Kentucky					–	–		
Louisiana		–	–	520	952	1,298	1,523	1,835
Maine	995	1,113	1,171	1,062	1,190	1,229	1,348	1,384
Maryland			–	–	–	94	206	451
Massachusetts	7,668	9,770	11,024	11,982	13,476	14,969	17,229	18,788
Michigan					508	1,025	1,544	1,726
Minnesota	8,221	8,145	8,422	8,046	8,108	8,246	8,455	8,808
Mississippi			*	*				
Missouri (new)					0	–	469	
Missouri (old)	–	8,858	17,496	23,061	20,829			
Montana						–	–	–
Nebraska	173	151	148	180	141	143	187	180
Nevada	–	–	–	8	28	28	36	48
New Hampshire	–	1,122	1,545	1,994	2,188	2,156	2,208	2,318
New Jersey	329	737	1,193	1,695	2,230	2,806	3,464	4,024
New Mexico	205	622	857	892	1,455	2,260	2,313	2,070
New York		–	936	2,887	4,706	5,958		
North Carolina			–	–	–	–	–	156

State	2001	2002	2003	2004	2005	2006	2007	2008
North Dakota		–	–	262	397	474	553	631
Ohio		–		–	–	–	–	2,702
Oklahoma	–	–	–	–				
Oregon	163	615	976	781	786	792	855	1,286
Pennsylvania		1,295	2,776	4,823	7,660	10,471	12,597	13,458
Rhode Island	–	–	–	–	–	19	23	31
South Carolina			83	70	71	47	51	
South Dakota		–	–	–	–	5	78	140
Texas		–	–	–				73
Utah	321	554	581	657	773	1,109	1,226	1,222
Vermont	521	681	756	850	899	939	917	953
Virgin Islands						–		
Virginia		–	–	–	–	–	14	28
Washington	–	153	285	549	947	1,246	1,474	1,656
West Virginia	–	–	–	86		549	844	1,099
Wisconsin	1,967	4,434	6,672	9,083	11,522	13,067	14,575	16,378
Wyoming					11	30	85	72
National Total	27,462	49,693	77,078	96,383	110,194	102,843	109,351	119,424

Source: Medicaid Buy-In finder files, 2001-2008.

Notes: Cells with “–” denote years in which the state did not have a Buy-In program. Cells that are blank denote years in which the state did not have MIG funding. Cells with “ * “ denote years in which the state did not submit data. Cases that appear in two states during the same year are not duplicated in the national total but do appear as a case within each state. For identical SSNs, the record with the earliest Buy-In start date was kept for the national total.

Table B.7: Total Number of Newly Enrolled in Buy-In Programs, by MIG State and Year, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	–	–	–	–	–	–	–	–
Alaska	107	133	128	135	126	129	122	133
Arizona							328	351
Arkansas					20	72	67	42
California		409	476	699	1,316	2,177	2,052	1,849
Colorado	–							
Connecticut	1,657	1,387	1,160	1,117	1,488	1,350	1,352	1,229
Delaware	–	–	–					
District of Columbia	–	–	–	–	–	–	–	–
Florida						–	–	–
Georgia	–							
Hawaii					–	–	–	–
Idaho	–							
Illinois	–	368	363	345	338	201	201	163
Indiana			3,995	3,391	2,883	2,405	2,123	1,391
Iowa	1,916	2,267	2,219	2,670	2,900	2,650	2,515	2,483
Kansas	–	511	358	337	364	254	276	295
Kentucky					–	–		
Louisiana		–	–	520	483	500	590	690
Maine	506	445	457	388	421	423	438	445
Maryland			–	–	–	94	120	260
Massachusetts	2,784	3,699	3,295	3,759	4,340	4,452	4,915	5,580
Michigan					473	602	916	686
Minnesota	2,366	1,688	1,746	1,373	1,346	1,129	1,226	1,321
Mississippi			*	*				
Missouri (new)					0	–	469	
Missouri (old)	–	8,858	8,732	7,352	1,851			
Montana						–	–	–
Nebraska	70	46	45	64	59	61	79	69
Nevada	–	–	–	8	21	5	18	17
New Hampshire	–	1,122	526	658	681	584	570	588

State	2001	2002	2003	2004	2005	2006	2007	2008
New Jersey	322	425	552	641	728	849	944	1,016
New Mexico	205	417	235	345	739	856	737	576
New York		–	936	1,956	2,045	1,861		
North Carolina			–	–	–	–	–	156
North Dakota		–	–	262	144	122	137	130
Ohio		–		–	–	–	–	2,702
Oklahoma	–	–	–	–				
Oregon	127	452	388	166	202	179	230	590
Pennsylvania		1,295	1,611	2,471	3,585	4,145	4,741	3,973
Rhode Island	–	–	–	–	–	19	11	11
South Carolina			5	17	16	6	17	
South Dakota		–	–	–	–	5	73	70
Texas		–	–	–				36
Utah	321	381	339	364	389	572	618	559
Vermont	276	295	261	284	264	243	242	244
Virgin Islands						–		
Virginia		–	–	–	–	–	14	15
Washington	–	153	141	311	480	453	492	461
West Virginia	–	–	–	86		321	387	412
Wisconsin	1,085	2,713	2,752	3,233	3,460	3,062	3,188	3,429
Wyoming					6	24	57	7
National Total	11,736	27,044	30,690	32,909	31,116	29,759	30,217	31,941

Source: Medicaid Buy-In finder files, 2001-2008.

Notes: Cells with “–” denote years in which the state did not have a Buy-In program. Cells that are blank denote years in which the state did not have MIG funding. Cells with “ * “ denote years in which the state did not submit data. Cases that appear in two states during the same year are not duplicated in the national total but do appear as a case within each state. For identical SSNs, the record with the earliest Buy-In start date was kept for the national total.

Table B.8: Percent of Buy-In Enrollees with Positive Earnings, by State and Year, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	-	-	-	-	-	-	-	-
Alaska	57.54	52.57	57.79	55.91	57.42	58.61	56.71	53.37
Arizona							89.79	87.22
Arkansas					85.71	90.48	87.72	86.75
California	78.04	76.22	74.66	74.92	73.78	71.77	68.75	63.00
Colorado		-						
Connecticut	93.95	90.32	87.39	87.78	88.13	87.42	86.46	84.93
Delaware		-	-	-				
District of Columbia	-	-	-	-	-	-	-	-
Florida						-	-	-
Georgia	-							
Hawaii					-	-	-	-
Idaho	-	-						
Illinois	-	98.94	97.52	96.69	96.68	97.44	95.69	94.13
Indiana			89.29	89.34	87.73	86.81	87.17	86.28
Iowa	65.52	55.09	49.80	45.24	42.60	41.47	39.83	37.70
Kansas	-	95.69	94.95	93.96	93.98	92.18	94.85	92.50
Kentucky					-	-		
Louisiana		-	-	94.22	91.89	87.35	89.62	87.18
Maine	91.54	92.90	91.97	92.93	93.10	92.60	92.66	90.39
Maryland			-	-	-	95.74	93.69	88.86
Massachusetts	91.40	88.44	85.25	80.15	76.47	71.90	70.42	68.41
Michigan					92.49	87.49	88.14	85.73
Minnesota	85.35	85.95	86.54	90.70	93.10	92.77	92.66	90.63
Mississippi			*	*				
Missouri (new)					-	-	97.01	
Missouri (old)	-	43.37	40.89	39.68	36.01			
Montana						-	-	-
Nebraska	94.80	94.04	91.22	93.89	97.16	95.80	96.26	93.89
Nevada	-	-	-	87.50	85.71	71.43	86.11	68.75
New Hampshire	-	91.70	87.82	87.55	90.13	92.30	91.94	89.73
New Jersey	93.29	91.59	90.70	87.26	84.29	79.96	75.93	70.94
New Mexico	54.41	47.50	46.89	63.62	56.85	47.79	49.56	50.66
New York		-	85.05	84.23	83.62	81.78	81.21	80.35
North Carolina			-	-	-	-	-	91.03
North Dakota		-	-	97.33	95.72	96.20	96.20	93.34
Ohio		-	-	-	-	-	-	95.30
Oklahoma		-	-	-	-			
Oregon	91.41	92.03	86.56	88.99	89.31	90.39	89.71	87.39
Pennsylvania		75.35	75.71	72.45	71.61	68.40	67.84	67.42
Rhode Island	-	-	-	-	-	100.00	100.00	90.32
South Carolina			87.95	91.43	94.37	95.74	96.08	
South Dakota		-	-	-	-	80.00	96.10	94.24
Texas		-	-	-				93.15
Utah	85.71	75.32	77.08	81.62	84.84	87.51	88.57	89.20
Vermont	91.94	88.20	88.06	89.50	85.84	88.49	93.89	92.53
Virgin Islands						-		
Virginia		-	-	-	-	-	100.00	82.14

State	2001	2002	2003	2004	2005	2006	2007	2008
Washington	–	96.08	93.33	90.53	87.01	86.92	88.04	85.67
West Virginia	–	–	–	91.86		89.80	89.44	87.06
Wisconsin	83.39	71.85	63.19	57.05	51.76	48.89	47.13	44.30
Wyoming					45.45	80.00	67.06	59.72
National Average	84.90	73.85	70.02	67.61	66.88	71.43	70.16	68.39

Source: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001-2008.

Note: Cells with “–” denote years in which the state did not have a Buy-In program. Cells that are blank denote years in which the state did not have MIG funding. Cells with “ * “ denote years in which the state did not submit data. Missouri discontinued its first Buy-In program in August 2005 but started a new program in 2007; for presentation purposes, the two programs are shown in separate rows. Cases that appear in two states during the same year are not duplicated in the national total but do appear as a case within each state. For identical SSNs, the record with the earliest Buy-In start date was kept for the national total.

Table B.9: Average Earnings (in \$) Among Buy-In Enrollees with Positive Earnings, by State and Year, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	—	—	—	—	—	—	—	—
Alaska	12,653	12,240	12,872	13,512	12,854	12,028	12,322	12,252
Arizona							10,269	9,863
Arkansas					14,511	14,487	15,189	15,811
California	9,947	11,362	11,051	10,996	11,074	11,457	10,942	10,545
Colorado		—						
Connecticut	8,112	8,276	8,102	8,301	8,111	8,144	7,916	7,926
Delaware		—	—	—				
District of Columbia	—	—	—	—	—	—	—	—
Florida						—	—	—
Georgia	—							
Hawaii					—	—	—	—
Idaho	—	—						
Illinois	—	7,976	7,791	7,969	8,018	7,777	7,883	7,727
Indiana			6,741	7,147	7,313	7,931	8,077	7,653
Iowa	5,132	4,991	4,940	4,968	5,080	5,150	5,155	5,278
Kansas	—	5,375	5,696	5,916	5,939	6,459	6,633	7,013
Kentucky					—	—		
Louisiana		—	—	10,625	10,206	11,131	12,047	12,052
Maine	9,838	10,177	9,878	10,005	9,317	9,398	9,332	8,971
Maryland			—	—	—	9,325	9,594	9,056
Massachusetts	15,896	15,282	14,813	14,557	13,897	13,381	13,334	13,145
Michigan					7,533	7,816	7,966	7,767
Minnesota	6,502	6,615	6,613	6,469	6,574	6,613	6,392	6,225
Mississippi			*	*				
Missouri (new)					—	—	8,352	—
Missouri (old)	—	5,356	6,198	6,700	6,754			
Montana						—	—	—
Nebraska	8,595	10,022	9,622	9,150	9,039	8,921	9,472	8,654
Nevada	—	—	—	9,737	12,412	15,652	11,668	12,276
New Hampshire	—	6,335	6,409	6,821	7,225	7,501	7,787	7,784
New Jersey	8,023	8,316	8,959	9,380	9,229	9,284	9,442	9,089
New Mexico	9,877	9,219	10,115	10,329	9,691	9,751	9,768	10,055
New York		—	8,430	9,137	8,800	9,010	9,117	9,025
North Carolina			—	—	—	—	—	9,453
North Dakota		—	—	5,378	5,886	5,938	5,600	5,639
Ohio		—	—	—	—	—	—	6,092
Oklahoma		—	—	—	—			
Oregon	12,020	11,087	8,790	9,774	9,682	10,115	10,087	7,185
Pennsylvania		7,422	7,877	8,563	9,175	9,849	10,380	10,726
Rhode Island	—	—	—	—	—	9,062	13,975	13,807
South Carolina			15,137	16,342	17,436	19,458	18,011	
South Dakota		—	—	—	—	20,958	9,181	9,516
Texas		—	—	—				12,466
Utah	8,784	7,976	7,609	7,636	8,344	8,415	8,136	7,269
Vermont	7,927	8,143	7,842	7,955	8,015	7,989	8,121	7,649
Virgin Islands						—		

State	2001	2002	2003	2004	2005	2006	2007	2008
Virginia		–	–	–	–	–	5,767	9,145
Washington	–	7,244	8,681	8,362	8,742	9,404	9,914	9,725
West Virginia	–	–	–	12,272		12,077	12,621	13,087
Wisconsin	6,240	5,784	5,689	5,538	5,394	5,131	4,997	4,790
Wyoming					13,121	8,570	7,414	7,959
National Average	9,627	8,869	8,308	8,339	8,380	8,772	8,922	8,741

Source: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001-2008.

Note: Cells with "–" denote years in which the state did not have a Buy-In program. Cells that are blank denote years in which the state did not have MIG funding. Cells with "*" denote years in which the state did not submit data. Missouri discontinued its first Buy-In program in August 2005 but started a new program in 2007; for presentation purposes, the two programs are shown in separate rows. Cases that appear in two states during the same year are not duplicated in the national total but do appear as a case within each state. For identical SSNs, the record with the earliest Buy-In start date was kept for the national total.

Table B.10: Total Earnings (in thousands of dollars) Among Buy-In Enrollees with Positive Earnings, by State and Year, 2001-2008

State	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	-	-	-	-	-	-	-	-
Alaska	1,303	1,628	2,291	2,621	2,635	2,538	2,551	2,524
Arizona							12,375	12,655
Arkansas					871	1,651	2,278	2,277
California	5,690	8,192	9,802	13,404	20,819	33,992	38,493	37,244
Colorado		-						
Connecticut	19,906	25,864	26,834	31,079	36,019	39,849	42,162	44,165
Delaware		-	-	-				
District of Columbia	-	-	-	-	-	-	-	-
Florida						-	-	-
Georgia	-							
Hawaii					-	-	-	-
Idaho	-	-						
Illinois	-	2,991	5,205	6,749	7,938	7,396	7,000	6,197
Indiana			46,947	59,628	63,084	60,546	58,343	47,952
Iowa	13,681	16,063	18,393	20,976	24,042	26,680	27,228	28,064
Kansas	-	2,628	4,500	5,703	6,866	7,615	8,304	8,906
Kentucky					-	-		
Louisiana		-	-	5,195	8,900	12,600	16,432	19,259
Maine	8,943	10,513	10,628	9,865	10,313	10,695	11,655	11,223
Maryland			-	-	-	839	1,852	3,613
Massachusetts	111,205	131,734	138,831	138,972	142,498	143,261	160,458	167,191
Michigan					3,525	6,996	10,834	11,480
Minnesota	45,488	46,202	48,098	47,124	49,595	50,540	50,043	49,655
Mississippi			*	*				
Missouri (new)					-	-	3,800	
Missouri (old)	-	20,171	43,546	60,342	49,883			
Montana						-	-	-
Nebraska	1,410	1,423	1,299	1,546	1,238	1,222	1,705	1,463
Nevada	-	-	-	68	298	313	362	405
New Hampshire	-	6,506	8,684	11,895	14,248	14,928	15,808	16,182
New Jersey	2,455	5,613	9,694	13,873	17,332	20,787	24,777	25,850
New Mexico	1,096	2,710	4,046	5,815	7,966	10,453	11,106	10,468
New York		-	6,618	21,910	34,195	43,346	50,461	56,902
North Carolina			-	-	-	-	-	1,342
North Dakota		-	-	1,371	2,237	2,708	2,979	3,322
Ohio		-	-	-	-	-	-	15,688
Oklahoma		-	-	-	-	-	-	-
Oregon	1,791	6,275	7,419	6,793	6,797	7,232	7,737	8,069
Pennsylvania		7,170	16,448	29,775	49,977	69,531	87,263	95,782
Rhode Island	-	-	-	-	-	172	321	387
South Carolina			1,105	1,046	1,168	876	883	
South Dakota		-	-	-	-	84	679	1,247
Texas		-	-	-				848

State	2001	2002	2003	2004	2005	2006	2007	2008
Utah	2,372	3,286	3,378	4,070	5,465	8,137	8,828	7,923
Vermont	3,797	4,869	5,207	6,038	6,172	6,631	6,993	6,731
Virgin Islands						–		
Virginia		–	–	–	–	–	81	210
Washington	–	1,065	2,309	4,156	7,204	10,184	12,849	13,780
West Virginia	–	–	–	970		5,954	9,516	12,498
Wisconsin	10,153	18,214	23,677	28,305	31,729	32,311	33,832	34,289
Wyoming					66	206	423	342
National Average	233,572	323,018	444,830	539,023	612,799	639,964	679,622	708,863

Source: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001-2008.

Note: Cells with “–” denote years in which the state did not have a Buy-In program. Cells that are blank denote years in which the state did not have MIG funding. Cells with “ * ” denote years in which the state did not submit data. Missouri discontinued its first Buy-In program in August 2005 but started a new program in 2007; for presentation purposes, the two programs are shown in separate rows. Cases that appear in two states during the same year are not duplicated in the national total but do appear as a case within each state. For identical SSNs, the record with the earliest Buy-In start date was kept for the national total.

Table B.11: Percent of Participants Charged Buy-In Premiums for at Least One Month in 2008, by State

State	Percent Who Were Charged A Premium	Average Monthly Premium Charge Amounts	Total Amount of Premiums Charged in 2008
Alabama	—	—	—
Alaska	67.1	33.76	59,472.00
Arizona	48.2	60.94	52,128.00
Arkansas	*	*	*
California	100.0	70.91	3,388,562.00
Colorado			
Connecticut	13.7	29.45	207,858.00
Delaware			
District of Columbia	—	—	—
Florida	—	—	—
Georgia			
Hawaii	—	—	—
Idaho			
Illinois	99.5	54.30	428,357.00
Indiana	100.0	72.22	1,695,239.00
Iowa	26.9	43.00	1,637,185.00
Kansas	82.6	66.64	716,150.00
Kentucky			
Louisiana	11.5	71.32	125,910.00
Maine	7.9	10.09	5,980.00
Maryland	94.6	15.47	45,731.00
Massachusetts	64.1	40.83	4,486,115.00
Michigan	*	*	*
Minnesota	99.9	60.43	5,242,468.00
Mississippi			
Missouri (new)			
Missouri (old)			
Montana	—	—	—
Nebraska	5.6	38.59	1,975.00
Nevada	91.7	44.78	10,065.00
New Hampshire	69.6	51.24	136,762.00
New Jersey	*	*	*
New Mexico	*	*	*
New York			
North Carolina	*	*	*
North Dakota	100.0	79.51	344,603.00
Ohio	100.0	32.78	100,912.00
Oklahoma			
Oregon	84.8	79.86	782,060.00
Pennsylvania	93.1	86.16	2,963,116.00
Rhode Island	64.5	65.49	13,463.00
South Carolina			

State	Percent Who Were Charged A Premium	Average Monthly Premium Charge Amounts	Total Amount of Premiums Charged in 2008
South Dakota	*	*	*
Texas	34.3	95.82	18,855.00
Utah	92.9	135.91	853,531.00
Vermont	*	*	*
Virgin Islands			
Virginia	*	*	*
Washington	96.3	86.87	1,315,969.73
West Virginia	100.0	51.66	367,943.81
Wisconsin	8.9	157.43	1,879,911.00
Wyoming	98.5	101.63	42,982.00
Total	55.3	64.08	26,923,303.54

Notes: Cells with “ * ” denote states that did not submit premium data for 2008. Cells with “-” denote states that did not have a Medicaid Buy-In program during 2008. Cells that are blank denote states that did not have MIG funding during 2008. Missouri discontinued its first Buy-In program in August 2005 but started a new program in 2007; for presentation purposes, the two programs are shown in separate rows.

Average monthly premiums charged includes all Buy-In participants, even those who were charged \$0 per month. Of states with a MIG and a Buy-In in 2008, 27 submitted records regarding the amount of premiums charged to Buy-In participants in 2008. Of the eight states that did not submit data on premiums, Arkansas, New Mexico, North Carolina, South Dakota, Vermont, and Virginia did not have a premium structure in place; and although Michigan and New Jersey did, neither collected premiums from any participant during the year.

Table B.12: Percent of People with Disabilities Who are Working, by State, 2008

State	Grant Type 2008	Total Working Age Population (18-64)	Percent Working Age Population with a Disability	Percent of Population with a Disability Who Are Employed	Percent of Working Age Population Without a Disability	Percent of Population Without a Disability Who Are Employed
United States	–	187,579,233	10.13	39.06	89.87	77.69
Alabama	Basic	2,840,491	14.65	33.38	85.35	75.65
Alaska	Comp.	430,938	12.23	48.62	87.77	77.65
Arizona	Basic	3,842,529	10.47	41.64	89.53	76.33
Arkansas	Basic	1,714,875	15.84	32.56	84.16	77.09
California	Comp.	22,810,866	8.21	36.49	91.79	74.96
Colorado	–	3,154,163	8.10	47.82	91.90	80.72
Connecticut	Comp.	2,180,193	8.24	40.79	91.76	80.13
Delaware	–	533,701	10.83	43.24	89.17	78.45
DC	Basic	402,887	8.92	31.46	91.08	75.88
Florida	Basic	10,894,707	9.74	36.38	90.26	76.41
Georgia	–	5,986,946	10.32	39.58	89.68	76.53
Hawaii	Basic	766,424	7.35	43.60	92.65	79.63
Idaho	–	912,280	10.17	45.45	89.83	78.34
Illinois	Basic	8,038,424	8.22	39.56	91.78	77.81
Indiana	Basic	3,924,912	10.98	38.54	89.02	78.57
Iowa	Basic	1,830,038	9.27	51.61	90.73	84.55
Kansas	Comp.	1,697,727	10.29	50.52	89.71	83.01
Kentucky	–	2,645,727	15.82	30.15	84.18	75.36
Louisiana	Basic	2,695,878	13.21	35.50	86.79	75.31
Maine	Comp.	833,572	13.52	39.87	86.48	80.14
Maryland	Basic	3,537,345	8.32	45.12	91.68	81.65
Massachusetts	Comp.	4,160,088	9.21	39.47	90.79	80.24
Michigan	Basic	6,221,972	11.42	33.57	88.58	74.55
Minnesota	Comp.	3,292,177	7.71	50.86	92.29	83.55
Mississippi	–	1,755,544	15.95	34.52	84.05	74.41
Missouri	–	3,619,572	12.19	39.57	87.81	80.00
Montana	Cond.	599,132	11.46	45.22	88.54	79.46
Nebraska	Basic	1,081,562	8.69	48.04	91.31	84.99
Nevada	Basic	1,610,071	8.41	43.34	91.59	77.87

State	Grant Type 2008	Total Working Age Population (18-64)	Percent Working Age Population with a Disability	Percent of Population with a Disability Who Are Employed	Percent of Working Age Population Without a Disability	Percent of Population Without a Disability Who Are Employed
New Hampshire	Comp.	847,405	8.89	45.85	91.11	83.06
New Jersey	Comp.	5,410,666	7.48	41.70	92.52	79.13
New Mexico	Comp.	1,194,781	12.02	41.64	87.98	75.42
New York	–	12,315,259	8.81	35.78	91.19	76.18
North Carolina	Cond.	5,680,344	11.41	38.49	88.59	77.33
North Dakota	Comp.	396,501	8.42	56.56	91.58	84.45
Ohio	Basic	7,075,474	11.28	38.92	88.72	78.50
Oklahoma	–	2,181,461	14.92	43.61	85.08	78.45
Oregon	Comp.	2,390,463	11.06	41.48	88.94	77.49
Pennsylvania	Cond.	7,658,886	10.80	38.33	89.20	78.32
Rhode Island	Basic	661,768	10.47	38.31	89.53	78.06
South Carolina	–	2,734,614	12.27	32.84	87.73	74.91
South Dakota	Basic	479,108	8.83	55.86	91.17	84.24
Tennessee	–	3,856,551	13.11	35.22	86.89	77.05
Texas	Basic	14,753,527	10.21	42.37	89.79	77.43
Utah	Comp.	1,616,740	7.84	46.33	92.16	79.46
Vermont	Comp.	403,223	11.27	47.47	88.73	82.09
Virginia	Basic	4,802,928	8.91	39.95	91.09	79.71
Washington	Basic	4,123,998	10.43	41.69	89.57	78.32
West Virginia	Comp.	1,130,443	17.78	30.12	82.22	73.54
Wisconsin	Comp.	3,517,628	8.74	45.94	91.26	82.67
Wyoming	Basic	332,724	10.35	55.17	89.65	82.37

Source: U.S. Census Bureau: “2008 American Community Survey” Tables B18120 and C18120

Note: It is important to note that in its 2008 questionnaire, the ACS dropped a question on employment disability, and changed wording in other disability-related questions. As a result, the Census advised against making direct comparison between 2008 and earlier data. Data on the Virgin Islands are not available through ACS.

Table B.13: Fraction of People with Disabilities Who Are Working, by State, 2007

State	2007 Grant Type	Total Working Age Population (Ages 16-64)	Percent of Working Age Population with a Disability	Percent of Population with a Disability Who Are Employed	Percent of Working Age Population Without a Disability	Percent of Population Without a Disability Who Are Employed
United States	–	195,020,523	12.16	36.20	87.84	75.02
Alabama	Cond.	2,956,627	17.88	30.17	82.12	73.68
Alaska	Comp.	457,758	13.63	41.62	86.37	74.50
Arizona	Basic	3,958,827	11.46	36.00	88.54	73.32
Arkansas	Cond.	1,783,300	18.09	31.71	81.91	74.32
California	Comp.	23,813,857	10.22	35.55	89.78	72.13
Colorado	–	3,244,377	10.22	43.15	89.78	77.77
Connecticut	Comp.	2,280,955	9.89	41.91	90.11	77.75
Delaware	–	557,332	11.60	39.01	88.40	75.93
DC	Basic	404,199	11.34	32.79	88.66	73.73
Florida	Cond.	11,362,681	11.59	36.70	88.41	74.56
Georgia	–	6,197,084	12.07	33.31	87.93	73.96
Hawaii	Basic	804,033	9.89	42.91	90.11	75.09
Idaho	–	945,567	11.93	42.61	88.07	77.01
Illinois	Comp.	8,371,247	9.89	38.32	90.11	74.69
Indiana	Cond.	4,096,381	12.93	36.55	87.07	76.18
Iowa	Cond.	1,906,124	11.58	45.07	88.42	81.63
Kansas	Comp.	1,772,004	11.68	42.77	88.32	79.59
Kentucky	–	2,758,808	18.64	29.51	81.36	75.12
Louisiana	Basic	2,748,761	15.41	32.76	84.5	72.18
Maine	Comp.	873,828	16.50	36.69	83.50	79.38
Maryland	Basic	3,690,245	10.47	42.14	89.53	77.69
Massachusetts	Comp.	4,294,205	11.15	35.40	88.85	77.84
Michigan	Basic	6,567,092	13.60	31.66	86.40	72.29
Minnesota	Comp.	3,425,883	9.94	46.00	90.06	80.79
Mississippi	–	1,837,322	18.36	30.09	81.64	70.47
Missouri	Cond.	3,768,289	14.37	37.10	85.63	77.40
Montana	Cond.	624,378	13.29	41.92	86.71	76.91
Nebraska	Basic	1,126,891	10.97	46.06	89.03	82.11

State	2007 Grant Type	Total Working Age Population (Ages 16-64)	Percent of Working Age Population with a Disability	Percent of Population with a Disability Who Are Employed	Percent of Working Age Population Without a Disability	Percent of Population Without a Disability Who Are Employed
Nevada	Basic	1,660,603	10.62	40.24	89.38	75.91
New Hampshire	Comp.	885,785	10.97	43.49	89.03	79.90
New Jersey	Comp.	5,668,686	8.95	36.71	91.05	75.27
New Mexico	Comp.	1,256,644	13.56	36.78	86.44	72.56
New York	–	12,711,571	11.03	33.07	88.97	73.11
North Carolina	Cond.	5,851,250	13.98	34.90	86.02	75.33
North Dakota	Comp.	413,440	9.54	51.49	90.46	81.19
Ohio	Cond.	7,405,751	13.43	35.03	86.57	76.09
Oklahoma	–	2,272,961	16.36	37.19	83.64	76.35
Oregon	Comp.	2,470,203	13.51	40.34	86.49	75.52
Pennsylvania	Cond.	7,981,536	13.02	35.28	86.98	76.23
Rhode Island	Basic	699,080	13.14	36.93	86.86	76.95
South Carolina	Cond.	2,824,448	14.32	29.49	85.68	74.24
South Dakota	Basic	500,360	11.22	47.78	88.78	81.81
Tennessee	–	4,002,220	15.88	32.13	84.12	75.37
Texas	–	15,230,520	11.50	38.01	88.50	73.54
Utah	Comp.	1,659,641	9.95	48.65	90.05	77.40
Vermont	Comp.	421,412	13.35	46.17	86.65	80.62
Virginia	Cond.	5,018,935	10.83	36.34	89.17	76.85
Washington	Comp.	4,280,519	13.44	40.02	86.56	75.84
West Virginia	Comp.	1,176,111	21.26	27.49	78.74	71.43
Wisconsin	Comp.	3,657,858	11.02	42.05	88.98	79.93
Wyoming	Basic	342,934	12.89	50.55	87.11	81.97

Source: U.S. Census Bureau, “2007 American Community Survey,” Table B18020; email and telephone communication with CMS staff.

Note: It is important to note that in its 2008 questionnaire, the ACS dropped a question on employment disability, and changed wording in other disability-related questions. As a result, the Census advised against making direct comparison between 2008 and earlier data. Data on the Virgin Islands are not available through ACS.

Table B.14: Number of SSDI (Title II) Beneficiaries Who Worked in 2008

State	2008 Grant Type	SSDI Workers ^a	Workers with Benefits Withheld Because of Substantial Gainful Activity (SGA)	Workers with Benefits Terminated Because of Successful Return to Work
United States	–	7,259,069	38,063	37,585
Alabama	Basic	194,071	522	613
Alaska	Comp.	10,961	105	83
Arizona	Basic	133,649	1,076	908
Arkansas	Basic	122,215	388	376
California	Comp.	617,808	4,696	3,818
Colorado	–	84,316	438	500
Connecticut	Comp.	72,928	545	505
Delaware	–	23,658	148	164
DC	Basic	11,244	49	115
Florida	Basic	434,247	1,714	2,536
Georgia	–	222,221	552	1,100
Hawaii	Basic	20,738	171	124
Idaho	–	34,610	199	172
Illinois	Basic	251,479	1,411	1,564
Indiana	Basic	165,211	629	693
Iowa	Basic	65,619	397	328
Kansas	Comp.	61,391	339	330
Kentucky	–	181,635	636	517
Louisiana	Basic	128,159	709	631
Maine	Comp.	52,756	304	284
Maryland	Basic	103,176	527	822
Massachusetts	Comp.	172,985	1,566	1,463
Michigan	Basic	273,885	965	1,272
Minnesota	Comp.	103,994	744	674
Mississippi	–	116,338	306	420
Missouri	–	182,085	799	744
Montana	Cond.	23,872	104	80
Nebraska	Basic	36,511	236	199
Nevada	Basic	50,974	404	364
New Hampshire	Comp.	38,101	334	320
New Jersey	Comp.	169,800	1,129	894
New Mexico	Comp.	53,200	261	246
New York	–	453,315	3,256	2,715
North Carolina	Cond.	281,531	820	1,055
North Dakota	Comp.	12,532	64	62

State	2008 Grant Type	SSDI Workers ^a	Workers with Benefits Withheld Because of Substantial Gainful Activity (SGA)	Workers with Benefits Terminated Because of Successful Return to Work
Ohio	Basic	275,449	1,243	1,448
Oklahoma	–	109,797	427	390
Oregon	Comp.	86,460	474	372
Pennsylvania	Cond.	339,369	2,211	1,828
Rhode Island	Basic	32,151	218	193
South Carolina	–	147,289	325	537
South Dakota	Basic	16,198	86	86
Tennessee	–	207,610	506	775
Texas	Basic	470,481	2,561	2,151
Utah	Comp.	37,244	305	231
Vermont	Comp.	18,690	173	141
Virginia	Basic	185,122	876	928
Washington	Basic	142,721	1,028	850
West Virginia	Comp.	89,676	365	278
Wisconsin	Comp.	128,745	644	622
Wyoming	Basic	10,852	78	64

Source: SSA, “Annual Statistical Report on the Social Security Disability Insurance Program, 2008,” Table 56, Baltimore, MD: July 2009; email and telephone communication with CMS staff.

Note: SSA does not report specific data for the Virgin Islands.

^a SSDI workers are those who can claim SSDI benefits using their own work history, as opposed to spouses or children who qualify based on the work history of someone else.

Table B.15: Number of SSI (Title XVI) Beneficiaries Who Worked in 2007

State	2007 Grant Type	All Blind and Disabled Recipients	Total Number of Recipients Who Worked	1619(a)	1619(b)	Other ^a
United States	–	6,252,564	357,344	16,939	97,551	242,854
Alabama	Cond.	151,240	4,347	257	1,296	2,794
Alaska	Comp.	9,611	678	– ^b	– ^b	423
Arizona	Basic	88,645	4,291	271	1,482	2,538
Arkansas	Cond.	88,292	4,062	161	1,019	2,882
California	Comp.	892,983	47,531	4,001	11,091	32,439
Colorado	–	50,791	4,196	171	1,057	2,968
Connecticut	Comp.	48,813	4,183	138	1,300	2,745
Delaware	–	13,461	1,049	52	323	674
DC	Basic	20,500	789	50	324	415
Florida	Cond.	336,383	13,128	747	4,720	7,661
Georgia	–	183,836	7,090	297	1,916	4,877
Hawaii	Basic	17,287	963	54	363	546
Idaho	–	22,548	2,178	88	681	1,409
Illinois	Comp.	235,287	14,342	661	3,888	9,793
Indiana	Cond.	100,444	6,076	189	1,717	4,170
Iowa	Cond.	42,938	7,065	157	1,685	5,223
Kansas	Comp.	38,288	4,443	142	1,084	3,217
Kentucky	–	173,052	4,739	223	1,366	3,150
Louisiana	Basic	147,908	5,928	331	1,860	3,737
Maine	Comp.	31,810	2,278	80	729	1,469
Maryland	Basic	84,565	6,420	268	1,862	4,290
Massachusetts	Comp.	137,300	10,347	549	3,673	6,125
Michigan	Basic	214,949	13,580	473	3,318	9,789
Minnesota	Comp.	70,622	10,662	255	2,592	7,815
Mississippi	–	110,477	3,195	163	971	2,061
Missouri	Cond.	115,147	7,700	251	2,100	5,349
Montana	Cond.	15,020	2,057	55	481	1,521
Nebraska	Basic	21,720	3,206	78	693	2,435
Nevada	Basic	27,110	1,913	99	654	1,160
New Hampshire	Comp.	14,704	1,338	45	437	856
New Jersey	Comp.	124,772	8,034	319	2,257	5,458
New Mexico	Comp.	48,691	2,368	116	708	1,544
New York	–	521,964	31,514	1,587	8,390	21,537
North Carolina	Cond.	184,429	8,423	303	2,170	5,950
North Dakota	Comp.	7,491	1,387	29	383	975
Ohio	Cond.	246,620	17,683	566	3,840	13,277
Oklahoma	–	78,834	4,423	164	1,169	3,090
Oregon	Comp.	57,211	4,451	156	1,192	3,103
Pennsylvania	Cond.	310,640	16,773	741	4,905	11,127
Rhode Island	Basic	27,770	1,883	67	524	1,292
South Carolina	Cond.	95,307	4,736	153	1,017	3,566

State	2007 Grant Type	All Blind and Disabled Recipients	Total Number of Recipients Who Worked	1619(a)	1619(b)	Other ^a
South Dakota	Basic	11,887	2,134	59	496	1,579
Tennessee	–	149,358	5,379	202	1,455	3,722
Texas	–	441,410	16,238	751	4,811	10,676
Utah	Comp.	22,919	2,685	106	794	1,785
Vermont	Comp.	13,252	1,291	65	449	777
Virginia	Cond.	122,627	7,365	316	2,193	4,856
Washington	Comp.	108,884	6,823	463	2,532	3,828
West Virginia	Comp.	75,871	2,334	134	757	1,443
Wisconsin	Comp.	90,477	10,773	275	2,318	8,180
Wyoming	Basic	5,718	860	38	272	550

Source: SSA, "SSI Annual Statistical Report, 2007," Tables 40 and 44, Washington, DC: September 2008; email and telephone communication with CMS staff.

Note: SSA does not report specific data for the Virgin Islands.

^a These are individuals who were working but had amounts of earned income below the SGA level.

^b Data are not shown to avoid disclosure of information for particular individuals.

Table B.16: Number of SSI (Title XVI) Beneficiaries Who Worked in 2008

State	2008 Grant Type	All Blind and Disabled Recipients	Total Number of Recipients Who Worked	1619(a)	1619(b)	Other ^a
United States	–	6,415,997	355,750	16,107	99,475	239,707
Alabama	Basic	153,732	4,231	230	1,397	2,604
Alaska	Comp.	9,826	687	^b	226	^b
Arizona	Basic	90,768	4,267	234	1,495	2,538
Arkansas	Basic	92,261	4,038	136	1,023	2,879
California	Comp.	912,123	46,789	3,587	11,344	31,858
Colorado	–	52,157	4,142	152	1,106	2,884
Connecticut	Comp.	50,054	4,312	138	1,316	2,858
Delaware	–	13,863	1,024	39	326	659
DC	Basic	21,243	805	49	336	420
Florida	Basic	346,579	12,494	672	4,600	7,222
Georgia	–	189,363	7,172	289	2,031	4,852
Hawaii	Basic	17,780	975	48	391	536
Idaho	–	23,451	1,979	79	631	1,269
Illinois	Basic	238,927	14,094	706	3,838	9,550
Indiana	Basic	104,138	5,988	179	1,663	4,146
Iowa	Basic	43,707	6,920	152	1,667	5,101
Kansas	Comp.	39,850	4,478	161	1,100	3,217
Kentucky	–	176,078	4,718	202	1,373	3,143
Louisiana	Basic	152,017	5,848	329	2,043	3,476
Maine	Comp.	32,474	2,147	96	701	1,350
Maryland	Basic	87,578	6,459	267	2,009	4,183
Massachusetts	Comp.	140,417	10,571	541	3,787	6,243
Michigan	Basic	219,412	13,119	401	3,140	9,578
Minnesota	Comp.	72,983	10,856	237	2,664	7,955
Mississippi	–	111,099	3,183	139	1,032	2,012
Missouri	–	117,981	7,733	221	2,041	5,471
Montana	Cond.	15,434	2,052	55	475	1,522
Nebraska	Basic	22,380	3,081	81	653	2,347
Nevada	Basic	27,850	1,881	91	546	1,244
New Hampshire	Comp.	15,349	1,339	45	409	885
New Jersey	Comp.	128,088	8,020	276	2,347	5,397
New Mexico	Comp.	49,910	2,094	119	627	1,348
New York	–	532,841	31,653	1,657	8,723	21,273
North Carolina	Cond.	188,320	8,287	286	2,226	5,775
North Dakota	Comp.	7,558	1,403	33	379	991
Ohio	Basic	254,015	17,366	522	3,735	13,109

State	2008 Grant Type	All Blind and Disabled Recipients	Total Number of Recipients Who Worked	1619(a)	1619(b)	Other ^a
Oklahoma	–	82,064	4,488	182	1,294	3,012
Oregon	Comp.	59,421	4,550	158	1,209	3,183
Pennsylvania	Cond.	317,835	16,945	751	5,167	11,027
Rhode Island	Basic	28,246	1,823	48	485	1,290
South Carolina	–	97,630	4,855	135	1,078	3,642
South Dakota	Basic	12,068	2,159	50	516	1,593
Tennessee	–	152,078	5,437	197	1,486	3,754
Texas	Basic	464,361	16,736	836	5,295	10,605
Utah	Comp.	23,807	2,710	73	756	1,881
Vermont	Comp.	13,779	1,328	64	471	793
Virginia	Basic	124,466	7,437	300	2,272	4,865
Washington	Basic	112,207	6,868	408	2,644	3,816
West Virginia	Comp.	76,923	2,375	141	801	1,433
Wisconsin	Comp.	93,675	10,948	280	2,304	8,364
Wyoming	Basic	5,831	886	35	297	554

Source: SSA, “SSI Annual Statistical Report, 2008” Tables 41 and 45, Baltimore, MD: September 2009.

Note: SSA does not report specific data for the Virgin Islands.

^a These are individuals who were working but had amounts of earned income below the SGA level.

^b Data are not shown to avoid disclosure of information for particular individuals.

Table B.17: Number of SSDI (Title II) Beneficiaries Who Worked in 2007

State	2007 Grant Type	SSDI Workers ^a	Workers with Benefits Withheld Because of Substantial Gainful Activity (SGA)	Workers with Benefits Terminated Because of Successful Return to Work
United States	–	7,098,723	37,701	33,381
Alabama	Cond.	186,067	462	537
Alaska	Comp.	10,617	97	81
Arizona	Basic	103,052	1,069	857
Arkansas	Cond.	115,806	420	316
California	Comp.	593,506	4,783	3,234
Colorado	–	80,207	423	419
Connecticut	Comp.	70,581	540	464
Delaware	–	22,855	148	162
DC	Basic	10,732	88	148
Florida	Cond.	418,502	1,645	2,075
Georgia	–	212,423	567	826
Hawaii	Basic	19,938	179	121
Idaho	–	32,874	217	155
Illinois	Comp.	240,699	1,448	1,530
Indiana	Cond.	155,906	643	641
Iowa	Cond.	63,393	346	349
Kansas	Comp.	57,682	340	279
Kentucky	–	174,354	643	434
Louisiana	Basic	121,431	550	572
Maine	Comp.	50,503	350	253
Maryland	Basic	98,052	473	660
Massachusetts	Comp.	166,195	1,505	1,140
Michigan	Basic	260,391	1,027	1,389
Minnesota	Comp.	99,709	741	717
Mississippi	–	112,575	305	411
Missouri	Cond.	174,551	804	671
Montana	Cond.	22,717	101	108
Nebraska	Basic	34,934	237	164
Nevada	Basic	48,997	432	348
New Hampshire	Comp.	36,452	380	267
New Jersey	Comp.	163,420	1,164	899
New Mexico	Comp.	50,693	264	226
New York	–	433,320	3,216	2,604
North Carolina	Cond.	270,877	817	888
North Dakota	Comp.	12,055	56	74
Ohio	Cond.	261,093	1,282	1,102
Oklahoma	–	103,748	416	332
Oregon	Comp.	82,627	466	324
Pennsylvania	Cond.	324,943	1,959	1,499
Rhode Island	Basic	30,863	257	188
South Carolina	Cond.	140,472	305	484
South Dakota	Basic	15,578	90	100

State	2007 Grant Type	SSDI Workers ^a	Workers with Benefits Withheld Because of Substantial Gainful Activity (SGA)	Workers with Benefits Terminated Because of Successful Return to Work
Tennessee	–	198,646	496	600
Texas	–	439,474	2,321	1,760
Utah	Comp.	34,732	268	220
Vermont	Comp.	17,730	188	110
Virginia	Cond.	179,233	818	908
Washington	Comp.	136,697	1,097	796
West Virginia	Comp.	86,797	357	177
Wisconsin	Comp.	121,774	673	554
Wyoming	Basic	10,308	85	66

Source: SSA, “Annual Statistical Report on the Social Security Disability Insurance Program, 2007,” Table 56, Baltimore, MD: September 2008; email and telephone communication with CMS staff.

Note: SSA does not report specific data for the Virgin Islands.

^a SSDI workers are those who can claim SSDI benefits using their own work history, as opposed to spouses or children who qualify based on the work history of someone else.

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APPENDIX C

**MIG PROGRAM-LEVEL OUTCOME
QUESTIONNAIRE AND STATE RESPONSES**

The MIG Program-Level Outcome Questionnaire was first administered in 2008 to capture information about programs and projects implemented throughout the history of the MIG in each state. The survey was modified based on input from MIG Staff, and was fielded for a second time in March 2009. It was completed by 40 states that had MIG funding. In their responses, the states identified the MIG's contributions to programs, projects, or systems of support for people with disabilities who were working or preparing to work.

The information collected is divided into nine core outcome areas: (1) the Medicaid Buy-In, (2) PAS, (3) supported employment,¹⁷ (4) transportation, (5) benefits counseling and work incentive programs, (6) employment training and education, (7) employment networking, (8) research and evaluation, and (9) outreach. Within each category, states indicated activities that were funded by the MIG program. The following tables document the number of MIG states that indicated activity in each area at some point during the 2008 calendar year.

¹⁷ Supported employment facilitates competitive work in integrated work settings for individuals with significant disabilities (psychiatric, mental retardation, learning disabilities, traumatic brain injury) who have not traditionally had competitive employment and who need ongoing support services to perform their job. Supported employment programs are run by independent vocational providers, community mental health centers, and developmental disabilities service centers. These providers offer assistance such as job coaches, transportation, assistive technology, specialized job training, and individually tailored supervision.

Table C.1: State Responses to the 2009 MIG Program-Level Outcome Questionnaire¹⁸

Activity to Improve the Infrastructure to Increase Employment Among People with Disabilities	Number of States Reporting Activity Using MIG Funds
Medicaid Buy-In	
Develop policy around the Medicaid Buy-In	21
Initial program policy	6
Changes to initial program policy, legislative cycles	5
Expansion of eligibility (e.g., increased asset, income limits)	9
Restriction of eligibility (e.g., decreased asset, income limits)	0
Changes to premium requirements	8
Waiver modifications	4
State plan amendments	5
Develop disability review process for the Buy-In	1
Conduct analysis of the implications of the Buy-In policy changes	14
Increase Buy-In enrollment	23
Conduct strategic planning	13
Develop interagency coordination for building or implementing Buy-In	19
PAS	
Develop or modify policy to expand general PAS availability	7
Waiver modifications	3
State plan amendments	1
Develop or modify policy to expand workplace PAS availability	5
Waiver modifications	2
State plan amendments	2
Implement trial programs on PAS service delivery (e.g., pilot projects of limited scope to test PAS expansion options)	1
Conduct policy analysis of PAS expansion implications (e.g., fiscal implications of expanding PAS availability under certain conditions)	6
Supported Employment	
Conduct customized employment strategies (e.g., job carving)	10
Develop programs or waivers targeting specific subgroups of people with disabilities	9
Develop efforts to support self-employment	22
Develop efforts to support career or job development	18
Establish/support peer networks for employed people with disabilities	13
Transportation	
Develop new transportation programs or services	4
Inventory existing transportation programs or services	5
Improve or coordinate existing transportation programs or services	8

¹⁸ Although the questionnaire was fielded in March 2009, the responses cover activities that took place in 2008.

Activity to Improve the Infrastructure to Increase Employment Among People with Disabilities	Number of States Reporting Activity Using MIG Funds
Benefits Counseling and Work Incentive Programs	
Provide or support work incentives benefits counseling services, including services to targeted groups such as youth in transition	32
Initial benefits counseling	15
Follow-along benefits counseling	11
Provide support to an agency	21
Develop online benefits counseling tools	11
Develop/increase benefits counseling capacity (e.g., hire or train staff)	19
Make administrative changes to benefits counseling or work incentive programs	15
Develop new programs	4
Modify or expand programs	8
Develop technical assistance network for benefits counselors	11
Build linkages/relationships with other agencies to sustain BC supports and programs	30
Collaborate with other work incentive programs	38
Ticket to Work (SSA)	23
Disability Program Navigator (ETA/SSA)	21
Benefit Offset Demonstration (SSA)	6
WIPA	33
One-Stops	24
Asset development strategies	11
Other programs	10
Employment Training	
Provide training to service providers on employment and work incentives	31
Provide training to service providers on benefits counseling	28
Provide training to consumers on basic job skills (includes training to targeted groups)	9
Develop/provide/fund employer training	15
Provide training to staff and agencies on Buy-In program	26
Develop case studies for training (e.g., employers, HR professionals)	7
Provide training to transition programs	26
Provide training	15
ADA Requirements	7
PAS laws and VR vs. Medicaid-provided PAS Disability Program Navigator (ETA/SSA)	0
Career development	9
Employment barriers	14

Activity to Improve the Infrastructure to Increase Employment Among People with Disabilities	Number of States Reporting Activity Using MIG Funds
Employment Networking	
Build partnerships with employers/business organizations (e.g., Business Leadership Networks)	27
Build linkages/relationships with other agencies to sustain employment networks	30
Build job development networks	7
Build/facilitate partnerships between employers and potential employees	17
Provide technical assistance to employers on employment of persons with disabilities	22
Research and Evaluation	
Develop and conduct surveys or evaluations of Buy-In participants	16
Conduct research with consumers	15
Develop data sharing agreements to obtain needed data	14
Conduct data source mapping and identify gaps	9
Conduct outcomes evaluations for programs or projects	16
Design data collection strategies and collect data	26
Build integrated database/data warehouse	6
Track project/program participants over time	15
Conduct resource assessments/mapping	6
Conduct research with service providers	18
Conduct research with employers	11
Develop quality assurance measures (e.g. build tools or conduct assessments regarding services)	8
Build linkages/relationships to sustain research and evaluation	15
Disseminate research findings	18
Develop plans for research capacity sustainability	8
Outreach	
Develop and disseminate newsletter or outreach on Buy-In	19
Conduct outreach on the Medicaid Buy-In (e.g., website, videos, conference/summit, brochures)	37
Conduct outreach on PAS service availability (e.g., website, videos, conference/summit, brochures)	16
Conduct outreach on supported employment services, such as job coaching (e.g., website, videos, conference/summit, brochures)	18

Activity to Improve the Infrastructure to Increase Employment Among People with Disabilities	Number of States Reporting Activity Using MIG Funds
Conduct outreach/education on waiver program/state plan amendments and supported employment	13
Develop strategies/tools for hard-to-reach populations	15
Inform consumers about availability of benefits counseling (e.g., website, videos, conference/summit, brochures)	34
Inform consumers about availability of benefits counseling (e.g., website, videos, conference/summit, brochures)	30
Develop outreach tools for employers on employment of people with disabilities	21
Outreach to general public to inform that people with disabilities can work	26
Methods (e.g., billboards, informational sessions)	19
Participation in state- or federal-level efforts	16

Source: MIG Program-Level Outcome Questionnaire, March 2009.

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