

Table 5.C
Major Program Features and Requirements of Long Term Services and Supports Authorities

Feature	Section 1915(c)	Section 1915(i)	Section 1915(k)
Limited geographic area	Yes	No	No
Targeted population	Yes	Yes	No
Limits on number of persons served	Yes	No	No
Expand HCBS Financial Eligibility	Yes	Yes	Yes
Offer HCBS to persons who MEET institutional level-of-care	Yes	Yes	Yes
Offer HCBS to persons who DO NOT MEET institutional level-of-care	No	Yes	Yes
Include self-direction	Yes	Yes	Yes
Budget test	Cost neutral	None	None
Approval mechanism	Waiver application reviewed by CMS	State plan amendment approved by CMS	State plan amendment approved by CMS