

1915(k) Community First Choice (CFC)

Overview

The Affordable Care Act enacted Section 1915(k) of the Social Security Act, titled Community First Choice (CFC). CFC is a Medicaid state plan authority for delivering HCBS. It permits states to provide personal attendant services and related supports in a home and community-based setting to members who require an institutional level of care.

The state receives an additional six percentage points over its existing Federal Medical Assistance Percentage (FMAP) for these services. In Arizona's case, that would raise the state's FMAP rate from 66.29% to 72.29%.

Administration

Required services:

- Assistance with activities of daily living (ADLs), instrumental activities of daily living (IADLs) and health-related tasks.
- Acquisition, maintenance & enhancement of skills necessary for the individual to accomplish ADLs, IADLs, & health-related tasks.
- Back-up systems or mechanisms to ensure continuity of services & supports.
- Voluntary training on how to select, manage and dismiss staff.

Optional additional services include, but are not limited to:

- Expenditures for transition costs, such as rent and utility deposits, first month's rent and utilities, bedding, basic kitchen supplies, and other necessities linked to an assessed need for an individual to transition from an institution to a home and community-based setting where the individual resides;
- Expenditures relating to a need identified in a member's person-centered service plan that increases the member's independence or substitutes for human assistance, to the extent that expenditures would otherwise be made for the human assistance.

Other requirements:

- The state may not limit the number of members served or implement a waiting list.
- The state must allow self-direction of PAS and habilitation.
- The state may NOT target the 1915(k) benefit. Services must be provided statewide.

Eligibility

Functional: The member must meet an institutional level of care.

Financial: The member must either:

- Be in an eligibility group entitled to nursing facility services under the State plan; or
- Have income at or below 150% of the Federal poverty level.

Statutory and Regulatory References

- Social Security Act Section 1915(k)
- [42 Code of Federal Regulations \(CFR\) Chapter IV, Subchapter C, Part 441, Subpart K—Home and Community-Based Attendant Services and Supports State Plan Option \(Community First Choice\)](#)

1915(k) in Other States

Nine states have implemented 1915(k) services: California, Connecticut, Maryland, Montana, New York, Oregon, Texas, Washington, and Alaska.

Trends in other states:

- All CFC states except MT have expanded financial eligibility to members who qualify for Medicaid under an HCBS waiver (up to 300% SSI).
- Four CFC states offer additional services beyond the minimum benefit package (CT, MD, OR, WA).
- NY and TX deliver CFC through a managed long-term services and supports (MLTSS) model.

State	Expanded Financial Eligibility	Covers Optional Benefits	MLTSS
California	X		
Connecticut	X	X	
Maryland	X	X	
Montana			
New York	X		X
Oregon	X	X	
Texas	X		X
Washington	X	X	
Alaska	X		

Possible Cost Savings

A 2023 report from the National Institutes for Health (NIH) describes possible cost savings from implementing CFC in states that are relatively rebalanced (i.e., HCBS-oriented versus institutionally-oriented).¹

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9836960/#hesr14063-supitem-0001>