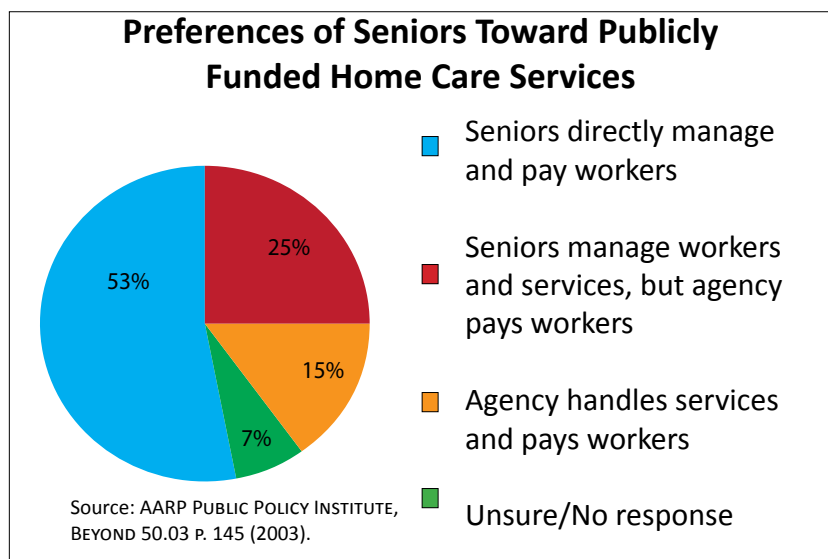


## PROTECTING THE RIGHTS OF LOW-INCOME OLDER ADULTS.

### SELF-DIRECTION

- Self-direction allows individuals to control their long-term services and supports to match their needs and preferences. It is also known as consumer-direction or participant direction.
- Individuals generally recruit, hire, train, and -- if necessary -- terminate their own providers.
- Seniors with cognitive impairments, behavioral health needs, or dementia can use self-direction with the proper supports.
- Individuals are generally more satisfied with self-direction than by assigned providers by an agency because choice promotes compatibility between individual and provider.<sup>1</sup>
- Under self-direction, providers are more likely to be familiar (family or friend), match the individual both ethnically and linguistically, have a longer tenure, and perform a wider variety of tasks.<sup>2</sup>
- Federal Medicaid law provides states with several avenues to fund self-direction programs.<sup>3</sup>
- In 2009, 94 Medicaid waiver programs in 36 states offered a self-direction option. Fifteen waiver programs required self-direction.<sup>4</sup>



1 A. E. Benjamin et al. Comparing Consumer-directed and Agency Models for Providing Supportive Services at Home, 35 HEALTH SERVS. RESEARCH 351, 360 (April 2000).  
2 *Id.*  
3 HCBS waiver program under Section 1915(c); Home and community-based state plan services under Section 1915(i); Community First Choice Option under 1915(k); and Self-directed personal assistance services under Section 19165(j).  
4 National Council on Disability, *The Case for Medicaid Self-Direction: A White Paper on Research, Practice, and Policy Opportunities* (May 2013).