

The waiver, decoded.

Two Maryland programs are constantly mistaken for one another — and the confusion costs your patients weeks of care they were entitled to on day one. This is the short version, written for the people who have to explain it to a family in a hallway.

01 The two programs families confuse

entitlement vs. waitlist

“There’s a years-long waiting list for Medicaid home care.”

True of the **Community Options Waiver** — the registry held more than 20,000 people in early 2026, with roughly 700 invited to apply each month. **Not** true of **Community First Choice**, which is an entitlement with **no wait list at all**. If your patient qualifies medically and financially, services can begin without waiting.

	Community First Choice (CFC)	Community Options Waiver
Wait list	None . Entitlement program.	Yes . Registry, multi-year wait.
Level of care	Help needed with 2 or more ADLs	Meets nursing home level of care
Medicaid required	Yes — Medical Assistance	Yes
Where care happens	Home or community residence	Home, or assisted living (room & board not covered)
Family paid to care	Yes, under self-direction — spouses included	Delivered through CFC services
How they relate	Waiver participants also receive CFC services. You do not need the waiver to get CFC.	

The 30-day rule — the one that matters most to you

If your patient is in a nursing facility and **Medicaid has paid for at least 30 days**, they may apply for the Community Options Waiver **with no wait**. The facility social worker can begin this. Ask for a referral to an options counselor.

02 What to tell a family today

three practical moves


Apply for CFC now

Do not wait for the waiver registry. If they are on Medicaid and need help with two or more ADLs, the application can start today — and there is nothing to wait for.



Count the Medicaid days

Thirty days of Medicaid-paid nursing facility care unlocks the waiver without the registry. Check the date before discharge, not after.



Name the gap out loud

Home health covers an hour. Ask the family who is there for the other twenty-three — that question prevents most readmissions.

03 How a case actually moves

five steps, in order

①

Entry

The family calls Maryland Access Point or applies for Medicaid. MAP is the state's single front door for long-term services.

②

Assessment

A nurse from the local health department completes an in-person assessment that determines eligibility and builds the plan of care.

③

Choice

The participant selects a Supports Planning Agency, then chooses a provider agency — or self-directs their own care.

The family chooses the agency, not the state. Your recommendation at that final step carries real weight.

04 What eligibility actually requires

2026 figures

FINANCIAL — COMMUNITY OPTIONS WAIVER

Income limit, individual	\$2,982/mo
Asset limit, single applicant	\$2,500
Asset limit, couple applying	\$3,000
Spousal minimum allowance	\$2,705/mo
Spousal maximum allowance	\$4,066/mo
Home equity limit	\$752,000
Assisted living room & board	about \$420/mo

Limits change each January. Confirm current figures with MAP or your local Department of Social Services before advising a family.

WHERE TO SEND PEOPLE

Maryland Access Point	844-627-5465
CFC / CO Waiver / MFP line	877-463-3464
Money Follows the Person	410-767-7242

CLINICAL CRITERIA — CFC

- ✓ Enrolled in Maryland Medicaid
- ✓ Needs help with **2+ ADLs** — bathing, dressing, eating, toileting, transferring
- ✓ Assessed by a local health department nurse

05 Terms your families mix up

home health is not home care

Home health	Medicare-certified and skilled. RN, PT, OT, speech therapy. Physician-ordered, roughly an hour at a time, ends when goals are met.
Personal care	Non-skilled and ongoing. Bathing, dressing, toileting, mobility, meals, supervision — four to twenty-four hours a day, for as long as it is needed. This is what we do.
ADLs vs. IADLs	ADLs — bathing, dressing, eating, toileting, transferring. IADLs — meals, shopping, laundry, transportation, medication reminders.

Have a patient going home who needs more than an hour at a time?

Every accepted client is matched and placed within **48 hours** — or we tell you within four, so you are never left holding a case. A full-time Care Coordinator is assigned to every family. Medicaid waiver and private pay, with help navigating both. **443.402.1039**