Executive Summary

The No Wrong Door (NWD) System initiative provides states and communities a roadmap for developing a one-stop resource hub and access point for long-term services and supports (LTSS) and benefits in states and territories. As the services and supports system can be difficult to navigate and understand, the impetus for the NWD System was to create a navigable access point for older adults and people with disabilities to LTSS needed to maintain quality of life, independence, and both access to and continued living in the community. NWD Systems build on the ADRC (Aging and Disability Resource Center) initiative and other programs. The design grew out of state need for a coordinated system of information and resources and has been supported by the Administration for Community Living (ACL), the Centers for Medicare & Medicaid Services (CMS), and the Veterans Health Administration (VHA).

Over time, states have configured NWD Systems in several ways that fit their benefits service delivery and design. In partnering with community-based organizations (CBOs), some states have relied on county-based resource centers, while others have partnered with the aging network, 211 information and referral agencies, and/or developed online resource hubs. The service array offered within a NWD System may vary throughout states, but the foundation of NWD includes information and referral/assistance, person-centered counseling¹, and access to benefits as well as state governance and administration. Individuals may contact a state or CBO to access information or obtain counseling on options and services regardless of the person’s age, income, or disability. While states are at varying points of implementing NWD Systems, the COVID-19 pandemic has presented states and their NWD Systems with challenges in providing benefit access and enrollment services to LTSS while also spotlighting disparities in health care. However, strong NWD System partnerships facilitated efficient pandemic response. Even in a challenging landscape, NWD Systems have continued to grow and evolve.²

The innovation and creativity of states’ NWD Systems demonstrate the benefit of state flexibility in meeting the needs of older adults and people with disabilities. As populations change, with more adults of all income and ability levels needing access to LTSS, having a NWD System in place will benefit states in providing timely, efficient, and cost-effective services, while also positioning states to meet the needs of future populations.

¹ According to the Administration for Community Living, “[p]erson-centered counseling...allows individuals to be engaged in the decision making process about their options, preferences, values, and financial resources. Individuals in need of service or who are planning for the future have access to one-on-one counseling in a variety of settings, including with the home, community residence, acute care hospital, school settings, or several other settings based on the individual’s needs.” [https://nwd.acl.gov/person-centered-counseling.html](https://nwd.acl.gov/person-centered-counseling.html)

² “Aging and Disability Resource Center/No Wrong Door Functions: A Leading Indicator in the 2020 Long-Term Services and Supports State Scorecard.” The Administration for Community Living and The Lewin Group, [https://www.longtermscorecard.org/~/media/Microsite/Files/2020/ADRC_NWD%202020%20Key%20Takeaways.pdf](https://www.longtermscorecard.org/~/media/Microsite/Files/2020/ADRC_NWD%202020%20Key%20Takeaways.pdf)
What is No Wrong Door?

NWD is a system designed to coordinate disparate LTSS offered through multiple state and local agencies and organizations, enabling individuals to access information through a coordinated point of entry and obtain support in making informed long-term choices. Individuals searching for information on LTSS options, such as personal care, nutrition, and transportation, may find the process intimidating and confusing. NWD Systems of access to LTSS are intended to help individuals and caregivers of all ages, abilities, and income levels to learn about and access LTSS. NWD Systems are also intended to help individuals make informed and person-centered decisions based on their goals, preferences, and needs.

The NWD initiative promotes states' efforts to develop coordinated systems of access to LTSS that engage multiple agencies and CBOs at the state and local levels and that foster shared and/or statewide processes and infrastructure. NWD Systems build on the ADRC model and initiatives that promote LTSS access. These can include, for example, Master Plans for Aging. The development of NWD Systems may occur in various ways, including through select grant opportunities that provide funding and development of training for NWD professionals.

State agencies play an important leadership role in the development and implementation of NWD Systems. Initiatives in NWD can have different types of lead agencies, such as a state unit on aging, a state human services agency, a state Medicaid agency, or state Public Health agency. It is equally important to involve key stakeholders, including individuals and their caregivers (i.e., families, friends, community supports, etc.) in the development, implementation, and ongoing administration of NWD Systems. Initial and ongoing support from a state’s legislature or governor is also critical to a successful NWD System. Figure 1 identifies those states that have legislative or governor support for their NWD Systems.

Figure 1: Map of States with Legislative/Governor Support for NWD Systems

Source: https://nwd.acl.gov/building-a-nwd-system.html
Brief History of NWD

In the early 2000’s, the Administration on Aging (AoA) and CMS provided the first ADRC grants to 12 states to build systems that provide a simplified process through which individuals of all ages, abilities, and incomes can get information and one-on-one counseling on the options available in their community. Over the years, additional grants were made to support ADRC activities, and in 2008, the VHA joined as a partner in the ADRC initiative.

Building on the ADRC model and based on the findings from ADRC states that no one agency or network could successfully implement a LTSS access system for all populations, ACL, CMS and VHA launched a NWD funding opportunity in 2012 to support states to move forward with the development and implementation of a NWD System for consumer access to LTSS options. Since 2012, additional funding opportunities have been made to support NWD Systems. For example, in 2018 ACL provided grants to ten states to enhance or modify their existing NWD Systems to demonstrate the value of home and community-based services.3 In 2020, ACL partnered with the Centers for Disease Control and Prevention to provide funding to 55 states and territories to expand access to COVID-19 vaccines for older adults and people with disabilities.4 Additionally, ACL recently awarded 10 grants to states with NWD Systems to assess individual and caregiver challenges to accessing LTSS and develop NWD System governance. 5 Figure 2 lists key milestones in the development of the NWD initiative.

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5 ACL awarded the grants in support of The Recognize, Assist, Include, Support and Engage (RAISE) Family Caregivers Act of 2017, (Public Law 115-119). States awarded the grants are Alaska, California, Indiana, Missouri, North Carolina, New Hampshire, Nevada, South Carolina, Tennessee, and Texas.
Wisconsin pilots “Resource Centers” to provide one-stop shopping for older adults, caregivers, people with disabilities to provide a wide range of long-term care options and perform eligibility determinations.

AoA and CMS provide first ADRC grants to 12 states to build a simplified process through which individuals of all ages, abilities, and incomes can get information and one-on-one counseling on the options available in their

The VHA joins as a partner in the ADRC initiative and began Veteran-Directed Home and Community Based Services, now known as the Veteran Directed Care program.

Care transitions are added as a core component of the initiative.

AoA gives grants to 16 states to work on evidence-based care transitions as part of ADRC.

Affordable Care Act (ACA) provided $50 million over 5 years to support development of ADRCs.

ACA also funded the Balancing Incentive Program to incentivize states to rebalance their Medicaid LTSS programs and required states to develop statewide NWD.

ACL, CMS, and VHA Provide “Part A” enhanced ADRC options counseling grants to 8 states to implement a NWD System based on findings from ADRC states that no one agency or network can implement a LTSS access system for all populations.

ACL, CMS, and VHA provide planning grants to 25 states to transform their ADRC systems using lessons learned from NWD Part A states.

ACL, CMS, and VHA define key elements of a NWD System of access to LTSS and award NWD systems grants to 13 states.

NWD Person-Centered Counseling Training Program is released to help build professional competency to implement person-centered practices.

ACL awards grants to 10 states to quantify the return on investment of NWD Systems.

In response to the COVID-19 pandemic, ACL awards ADRC/NWD System Critical Relief Funds to all states that applied.

ACL issues NWD funding opportunity to 10 states to assess individual and caregiver LTSS access challenges and develop NWD System governance.

Source: ADvancing States, Administration for Community Living
Key Elements of a NWD System

Federal partners and states worked to develop and refine a framework that helps align a fragmented infrastructure of LTSS services and benefits into a coordinated NWD System. These are the key elements of that system:

1. Public Outreach and Coordination with Key Referral Sources
2. Person-Centered Counseling (PCC)
3. Streamlined Eligibility for Public Programs
4. State Governance and Administration

These elements can help states provide leadership and assess their progress in creating a single statewide NWD System.

Public outreach and coordination with key referral sources can include many different community partners, such as schools, family members and friends, local nonprofit organizations, LTSS providers, 211s and local Information and Referral programs, hospitals and other acute care systems, Veterans Administration medical centers, and nursing homes. The purpose of outreach and coordination activities is to ensure that the NWD System is recognized as a trusted resource, especially among the underserved and hard-to-reach populations, such as low-income and limited English-speaking populations. Through connection and partnerships, NWD Systems are strengthened as one-stop shops for access to LTSS and needed resources. NWD services such as transitional services for youth, person-centered options counseling, preadmission consultation and care transitions, and counseling or connection to benefits are reinforced by these partnerships. CBOs can further provide public outreach; information, referral and assistance; screening and assessment; person-centered decision support; and application assistance for key programs.

Person-centered counseling is a core tenant of the NWD System. Serving as an access point to LTSS, the NWD will engage individuals in options counseling regardless of age, income or disability status. Options counseling is a person-centered discussion that helps individuals to weigh their goals, values, preferences, available supports, and plan for LTSS. This discussion includes unbiased objective information on a range of options, regardless of payor, including private pay or publicly funded options, as well as resources available in the community. This person-centered discussion may also include information on nursing home diversion in order to support individuals that wish to stay in the community. Just as states are varied in their NWD approaches, so too will the individual person-centered conversation vary to fit the needs of each person.

The NWD System is uniquely situated as not only an access point to LTSS, but also to provide streamlined eligibility to public programs and benefits. The NWD may act in various roles of benefits access such as: Medicaid application assistance, referral to local systems for additional public benefits support, provision of eligibility information and education, disability benefits specialists, advocacy, or sharing information on rights. The person-centered counseling discussion is a baseline on which NWD

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may leverage and share information for individuals on public programs and benefits that would most
benefit that person within the state system.

Further, state governance and administration are key to the success of a NWD System. Involvement of
state leadership, including agencies involved in the design and implementation of the program to the
input of community stakeholders, such as individuals and their families, is necessary to effectively
develop and maintain a NWD System. In addition, a state’s NWD System may include partner
organizations such as ADRCs, Area Agencies on Aging (AAAs), Centers for Independent Living (CILs),
Developmental Disability agencies, Medicaid agencies, and behavioral health organizations each serving
individuals with LTSS needs.

**Funding NWD Initiatives**

States may use different sources of funding for the design, development, and continued operation of a
NWD System. Funding NWD initiatives has stemmed from state and local funds but can also come from
other sources such as Medicaid administrative claiming, public and private partnerships, health plans,
and federal dollars from programs funded through the Older Americans Act, the Rehabilitation Act, and
other legislation. As noted on the NWD key milestones timeline, federal partners have awarded grants
for NWD planning and development over the past decade. These funding opportunities have tended to
be targeted in scope and reach. Many of the organizations that a state contracts with to carry-out NWD
activities, such as CBOs, will most likely have federal or state funding in place.7

**How Do I Find My State’s NWD?**

It is important to note that NWD is a term used to describe system structures, as such, not all states
refer to their streamlined consumer access system to LTSS as NWD. For instance, some states may refer
to their NWD System as ADRC or Access Point. Additionally, reflecting the long-term nature of systems
change initiatives, state efforts across the country are at different stages of development, ranging from
mature systems to those that are undertaking planning.

To learn more about the structure and governance of state LTSS systems, see ADVancing States’ State
Aging and Disabilities Agency Profiles available at [http://www.advancingstates.org/about/state-
agencies/state-aging-and-disabilities-agency-profiles](http://www.advancingstates.org/about/state-
agencies/state-aging-and-disabilities-agency-profiles). To visit state online ADRC/NWD access points, see
[http://www.advancingstates.org/initiatives/information-and-referralassistance/state-contacts](http://www.advancingstates.org/initiatives/information-and-referralassistance/state-contacts) from
ADVancing States’ National Information and Referral Support Center.

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7 For state examples of NWD funding and additional resources, see [https://www.ta-community.com/t/83hf6vn/acl-state-examples-of-nwd-funding](https://www.ta-community.com/t/83hf6vn/acl-state-examples-of-nwd-funding).
From the Beginning: NWD System Development in Wisconsin

Wisconsin and ADRCs

ADRCs originated in Wisconsin in 1998 as the state began to transition to a managed long-term care program, known as Family Care. The ADRC pilot was built upon an existing county-based service structure. By 2013, the state was fully served by ADRCs, either through the local county or regional consortia. Of note, Native American tribes may elect to have Tribal Aging and Disability Resource Specialists to serve tribal members and provide services in a culturally sensitive manner. Many county Aging Units which are the local aging program offices within the state have chosen to merge with the local ADRC, or create a region, to serve their communities in an integrated model of service delivery.8

In Wisconsin, ADRCs are operated by the Office for Resource Center Development (ORCD) within the Bureau of Aging and Disability Resources (BADR), in the Division of Public Health at the Wisconsin Department of Health Services. While ADRC services are defined through contract, regulations codified in state statute and administrative code also provide structure for ADRC operations and administration.

ADRCs are a critical component of and entry point into the state’s publicly funded long-term care system, and provide an array of services, including information and assistance, long-term care options counseling, dementia-related services and supports, preadmission counseling, caregiver supports, elder and disability benefits counseling, and access to publicly funded services, amongst other resources.

As a NWD System, ADRCs support benefit access both at the state and local level, in addition to outreach and awareness, person centered counseling, streamlined access to public programs, and governance and administration. As noted, there are program sites in all 72 counties and in 11 federally recognized tribes. ADRCs have developed strategic partnerships and coordination with essential services providers to create and enhance a NWD System, including regional CILs, State Health Insurance Assistance Programs (SHIPs), services for individuals who are deaf or hard of hearing, services for individuals who are blind or visually impaired, and others.

Community-Based Organization Engagement in NWD Systems

Community-based organizations or CBOs serve as partners for NWD Systems and can provide a variety of community-based supports and services. CBOs are organizations which facilitate access to home and community-based services to older adults and individuals with disabilities, such as public benefits assistance, screening and assessment, and person-centered decision support. Examples of CBOs are AAAs, CILs, and other aging and disability services providers serving local communities. State NWD Systems may be comprised of different types of CBOs that serve a myriad of roles, each acting as a gateway to LTSS.

To learn more about CBOs and NWD Systems, ADvancing States, with support of the National Council on Aging (NCOA) under a cooperative agreement with ACL, surveyed its members to assess the impact of the COVID-19 pandemic on benefit enrollment systems more than a year after the beginning of the pandemic. The survey was distributed to ADvancing States’ members in June 2021, and a web-based survey instrument was used to collect responses from state agencies. ADvancing States members include state aging and disability agencies that manage LTSS, including state-funded services, Older Americans Act programs, and Medicaid-funded LTSS. A total of 47 respondents participated in the survey, representing 39 states. The survey was focused on gathering insight on access to several benefit programs, such as the Medicare Savings Program and Low-Income Subsidy, as well as how states use their NWD Systems and the role of CBOs to facilitate access to the benefit programs. Some of the findings from the survey are presented in this section.

How Does My Community-Based Organization Fit Within a NWD System?

CBOs are an integral part of effective NWD Systems. CBOs play a formal role in carrying out NWD functions and are critical referral sources for NWD Systems. NWD Systems and their community partners facilitate access to federal, state, and local LTSS through:

- Public outreach and screening
- Information, referral, and assistance (I&R/A)
- Referrals (both cold and warm handoffs)
- Application assistance
- Person-centered counseling
- Medicare counseling and referrals through SHIPs

9 A summary of state initiatives to connect individuals with benefits, states’ changes to screening and enrollment tools used to determine eligibility for benefits, and process changes during the COVID-19 pandemic can be found on the ADvancing States’ website here: http://www.advancingstates.org/sites/nasuad/files/Benefit%20Access%20and%20Enrollment%20Since%20the%20Onset%20of%20COVID-19.pdf
Some of these LTSS activities are likely part of the everyday work of community organizations. AAAs and ADRCs, for example, can provide outreach and screening, information and assistance, and referrals. Respondents to the survey provided comments on how their local agencies assist individuals. One state said that “AAAs screen and assess individuals seeking OAA and state-funded aging services and programs.” Respondents also shared examples of person-centered counseling to help individuals create a plan of action, engage in decision making, and problem solve. One state said that CBO “staff are trained to provide person-centered support to all consumers.” Another state shared that their Department of Human Services “provides routine training on person-centered thinking approaches and invites providers and organizations to participate in the training.” Additionally, CBOs in partnership with aging and disabilities network agencies, such as AAAs and ADRCs, can provide access to LTSS, including screening individuals for benefits, referrals to local agencies, and outreach and education. As one state noted, “CBOs within a local ADRC partnership provide and enhance access to public benefits, I&R/A (information and referral/assistance), screening and assessment, person-centered decision support, etc. as part of criteria to become a state-designated ADRC.”

States provide many opportunities for CBOs to connect with NWD Systems, from the inclusion of a CBO’s services in a NWD’s database to partnering with AAAs and ADRCs and public outreach. The range of ways a CBO connects with a NWD System varies state-to-state and may include a few functions to many (see Figure 3). Training on person-centered counseling, inclusion in the state’s resource database, and partnership activities with the local AAA, ADRC, and SHIP are some of the examples states provided. One state shared that “CBOs can connect with their local AAA to find out more and to be sure their information is included in the ADRC Resource Database if the agency meets inclusion criteria. Local and statewide training on person-centered approaches is generally widely advertised and opened to anyone interested in attending.”

**Figure 3: Examples of CBO Opportunities with NWD Systems**

1. Inclusion in the resource database
2. Serve as an outreach partner
3. Participate in training on person-centered approaches
4. Receive training and resources to improve referrals
5. Participate in joint community/program presentations
6. Learn about and become a community partner
7. Attend partner meetings
8. Reach out to community access points (for example, AAAs and ADRCs)

Source: ADvancing States
State Approaches to CBO Partnerships

States approaches to partnerships with CBOs can vary in structure and arrangement, such as services and resources offered through the NWD System, type of CBO entities, and support and training. Below are examples of two state approaches to engagement of community partners.

Virginia No Wrong Door

The Virginia No Wrong Door (NWD) system is a statewide network of community partners and shared resources linked through a virtual system, designed to streamline access to LTSS – connecting individuals, providers, and communities across the Commonwealth. The initiative of the Virginia Department of Aging and Rehabilitative Services (DARS) is supported by two statewide resource databases, VirginiaNavigator and Virginia 2-1-1, to offer a statewide one-stop, coordinated, and person-centered system. Virginia’s NWD system was designed to provide individuals with streamlined access to LTSS information through collaborative partnerships supporting older adults, family caregivers, individuals with disabilities, and veterans seeking services and supports. Each of the 25 AAAs serve as a lead agency in their community and work with local partner agencies, such as CILS, transportation and home care agencies, and other agencies or organizations within the community to connect services and benefits to individuals. These network partners participate in Local Advisory Councils and statewide NWD network calls. In addition, network partners have access to the NWD Training Platform that hosts training modules, such as person-centered options counseling, trauma-informed care, assistive technology and more. The training site is regularly updated and is free to any NWD network partners.

Information on community resources consisting of over 27,000 statewide providers of long-term programs and services, as well as an individual’s personal information (with consent), is shared among community network partners using a secure system called ‘CRIA’ or Communication, Referral, Information and Assistance. CRIA is an electronic communication and referral tool that enables referrals to agencies and subsequent tracking to be done electronically instead of by phone, fax, or email. With consent from the individual, personally identifiable information is secured and protected under federal HIPPA guidelines and state guidelines of the Office of the Attorney General. Using this tool, individuals can access services quicker and more efficiently as compared to independently contacting several agencies; however, this is not the only way individuals can connect with resources. Through NWD’s suite of solutions individuals can access the system via a person-centered web portal, Virginia Easy Access, 24/7 live chat, and a toll-free number. Individuals also have the option to self-direct and request local services, institute referrals, and securely share data through the No Wrong Door Direct Connect tool.

Virginia’s NWD system has been recognized as a national leader in design, development, investment, and governance. The governance structure includes a Resource Advisory Council including Local Advisory Councils, an Advocacy Group, and an implementation team known as Home and Community Based Services, whose work focuses on the policy of the NWD system, including communication and marketing, person-centered practices, streamlined access, and governance and administration.
For additional information on the Virginia NWD system, see:

Website: [https://www.nowrongdoor.virginia.gov/default.htm](https://www.nowrongdoor.virginia.gov/default.htm)
Consumer-Centered Portal: [https://easyaccess.virginia.gov/](https://easyaccess.virginia.gov/)
Training Site: [https://www.nowrongdoortraining.dars.virginia.gov/](https://www.nowrongdoortraining.dars.virginia.gov/)

**Texas’ Community Partner Program**

The [Texas Community Partner Program](https://www.nowrongdoor.virginia.gov/default.htm) (CPP) is a statewide network of faith and community-based organizations or CBOs that help Texans apply for, renew, and manage their benefits on Texas’ [YourTexasBenefits.com](https://www.nowrongdoor.virginia.gov/default.htm) website. Community Partners assist individuals with online application and renewal of social service benefits, such as Supplemental Nutrition Assistance Program or SNAP, Temporary Assistance for Needy Families or TANF, Medicaid, Healthy Texas Woman, and the Children’s Health Insurance Program or CHIP.

The Texas Health and Human Services Commission serves as the lead agency and coordinates partnerships with community organizations including Food Banks, Health Clinics, AAAs, ADRCs, Federally Qualified Health Centers, and other non-profit CBOs.

The CPP offers three levels of participation:

- **Level 1: Self-Service Site**
  - Community Partners provide a computer for the public to apply for and manage benefits provided through the YourTexasBenefits.com website.

- **Level 2: Application Assistance Site**
  - Community Partners offer a computer for public use and provide trained staff or volunteers to assist individuals with applications and managing benefits.

- **Level 3: Case Assistance Site**
  - Community Partners fulfill Level 1 and Level 2 criteria and have Case Assistance Navigators that provide a greater level of support to clients.

As of October 21, 2022, the CPP has 615 partner organizations and 1,688 partner sites. In fiscal year 2022, Community Partners assisted with 78,365 applications and renewals, an increase of about 29% from the previous fiscal year.
Regionally located state staff (Community Support Specialists or CSS) provide support to Community Partners by providing informational updates (i.e., eligibility policy and operations updates, etc.), training and technical support about social service benefit programs, the YourTexasBenefits.com website and mobile app, and assisting with setting up Your Texas Benefits case accounts. They also assist with the webinars, Community Partner forums, and quarterly newsletters.

Community Partners can contact their CSS with questions and technical assistance as needed on program implementation and benefit information. In addition to the regional CSS staff, CPP state office staff facilitate the forums and webinars as well as approve all new Community Partners and act as a liaison.

For additional information on the Texas Community Partner Program, see https://www.texascommunitypartnerprogram.com/.
Conclusion

NWD Systems of access to LTSS are intended to help individuals and caregivers of all ages, disabilities, and income levels to learn about and access the LTSS they need. Reflecting on the long-term nature of systems change initiatives, state efforts across the country are at different stages of development, ranging from mature systems to those that are undertaking planning. NWD Systems build on the ADRC initiative and other programs offered in a state. NWD Systems are also intended to help individuals to make informed and person-centered decisions based on their goals, preferences, and needs. Person-centered decision making is a principle of NWD access.

Community-based organizations or CBOs serve as partners for NWD Systems and can provide a variety of community-based supports and services. CBOs are organizations which facilitate access to home and community-based services to older adults and individuals with disabilities, such as public benefits assistance, screening and assessment, and person-centered decision support.

The innovation and creativity of states’ NWD Systems demonstrate the benefit of state flexibility in meeting the needs of older adults and people with disabilities. As populations change, with more adults of all income and ability levels needing access to LTSS, having a NWD System in place will benefit states in providing timely, efficient, and cost-effective services, while also positioning states to meet the needs of future populations.
Resources

For ACL’s No Wrong Door website: https://nwd.acl.gov/index.html.

For information on person-centered counseling: https://nwd.acl.gov/person-centered-counseling.html.


For the Eldercare Locator Database for ADRCs: https://eldercare.acl.gov/Public/About/Database.aspx.

For tools and training on benefit programs for low-income Medicare beneficiaries, see NCOA’s MIPPA Resource Center: https://www.ncoa.org/professionals/benefits/center-for-benefits-access/mippa-resource-center.

For the State Health Insurance Assistance Program (SHIP): https://www.shiphelp.org/.

AARP Public Policy Institute’s “Aging and Disability Resource Center/No Wrong Door Functions: A Leading Indicator in the 2020 Long-Term Services and Supports State Scorecard”, Administration for Community Living and The Lewin Group, November 5, 2020, http://www.longtermsscorecard.org/~/media/Microsite/Files/2020/ADRC_NWD%202020%20Key%20Tak
eaways.pdf.


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