Working to Create “A Life Like Yours” (ALLY)

Home and Community Based Medicaid Waivers
The Arc of Northern Virginia: Who we are and What we do

- History
- Advocacy
- Education
- Information and Referral
- DD Waiver Case Management
- Guardianship
- Pooled Special Needs Trusts
Outline

1) Purpose and Description of Medicaid Waivers
2) Eligibility Criteria
3) Waiver Services
4) Application Process
5) Other Information
Purpose of the Waivers

Waivers give States the flexibility to offer services to an individual in the community rather than living and receiving services in an institution.
What is a Medicaid Waiver?

**Medicaid:** Medicaid is what pays for the services you can receive from a Medicaid Waiver.

**Waiver:** Waiving the requirement that all Medicaid services be offered to everyone and allowing a special group to get extra long term care supports.
Why Look at Waivers?

- Offer a menu of services and designed to be a “one stop shop” for most people, even with a wide range of needs
- Lifelong supports
- Only public funding stream for ongoing support services
- Free or very low cost for the individual with a disability
Six Waivers in Virginia

- Community Living Waiver
- Family and Individual Supports Waiver
- Building Independence Waiver
- Elderly or Disabled with Consumer Direction Waiver (EDCD)- now include the HIV/AIDS Waiver
- Technology Assisted Waiver (Tech)
- Alzheimer’s Assisted Living Waiver (AAL Waiver)
Proposed Integrated DD Waiver Redesign

**Building Independence Waiver**
For adults (18+) able to live independently in the community. Individuals own, lease, or control their own living arrangements and supports are complemented by non-waiver-funded rent subsidies. Supports are episodic/periodic in nature.

**Family & Individual Supports Waiver**
For individuals living with their families, friends, or in their own homes, including supports for those with some medical or behavioral needs. Available to both children and adults.

**Community Living Waiver**
24/7 services and supports for individuals with complex medical and/or behavioral support needs through licensed services. Includes residential supports and a full array of medical, behavioral, and non-medical supports. Available to adults and some children.

*Slide from DBHDS*
63% of ID waiver dollars were spent on Congregate Residential Services in FY 2015.

The majority of people on the waiting list are children and transition-age youth.

**I/DD Waiver Waiting List (10,288)**

- **Children**: 51%
- **Transition Age (18-21)**: 7%
- **Adults 22-65**: 79%
- **Adults Over 65**: 1%

**I/DD Waiver (11,724)**

- **Children**: 7%
- **Transition Age (18-21)**: 7%
- **Adults 22-65**: 34%
- **Adults Over 65**: 1%

Source: The Department of Behavioral Health and Developmental Services, January 2016
Three Criteria to Determine Eligibility

1. Diagnostic Criteria
2. Functional Criteria
3. Financial Eligibility Criteria
Diagnostic Eligibility

Disability Waivers (Community Living, Family and Individual Supports, Building Independence)

- Must have a diagnosis of developmental disability
- A psychological evaluation showing IQ and diagnosis is required*

“Developmental disability" means a severe, chronic disability of an individual that

(i) is attributable to a mental or physical impairment, or a combination of mental and physical impairments, other than a sole diagnosis of mental illness;
(ii) is manifested before the individual reaches 22 years of age;
(iii) is likely to continue indefinitely;
(iv) results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency; and
(v) reflects the individual's need for a combination and sequence of special interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are 2 of 3 individually planned and coordinated.

An individual from birth to age nine, inclusive, who has a substantial developmental delay or specific congenital or acquired condition may be considered to have a developmental disability without meeting three or more of the criteria described in clauses (i) through (v) if the individual, without services and supports, has a high probability of meeting those criteria later in life.”
Diagnostic Eligibility cont’d.

**EDCD Waiver**
- Individuals who have significant medical needs. The criteria used to determine eligibility is the nursing home criteria.

**Technology Assisted Waiver**
- Individuals who require ongoing skilled nursing care.
- Individuals 21 and older who are dependent at least part of each day on a mechanical ventilator or meet complex tracheotomy criteria
- Individuals under the age of 21 who meet certain criteria based on various methods of respiratory or nutritional support
Functional Criteria

Disability Waivers:
- All individuals must meet show functional need in three out of eight categories on the VIDES assessment
  - Versions for ages 0-3, 3-18, 18+
  - Categories include: Health Status, Communication, Task Learning Skills, Personal/Self Care, Mobility, Behavior, Community Living Skills, and Financial Self-Sufficiency

EDCD and Technology Waivers:
- Individuals must meet the nursing facility eligibility criteria determined by using the Uniform Assessment Instrument (UAI) [http://tinyurl.com/zdwfrl5](http://tinyurl.com/zdwfrl5)
- Focus on personal care and medical care needs
Financial Eligibility for Medicaid Long Term Care, like Waivers

Financial Thresholds

- $2199 per month (gross income)
- $2000 resource limit for adults
- $1000 resource limit for children
- Parent income/resources do NOT EVER count
Financial Eligibility

Q: If someone has applied for the Waiver, does this mean they have applied for Medicaid?

A: No!

These are two separate processes!

To apply for Medicaid, visit [https://commonhelp.virginia.gov/](https://commonhelp.virginia.gov/)
Financial Eligibility

Q: The household income is too high to qualify for Medicaid, should the individual still apply for a waiver?

A: Yes!

You CAN be on the waiting lists without receiving Medicaid benefits. Once a slot becomes available, you can apply for Medicaid under the “Long Term Care/Institutional Rules”.

And remember, different rules apply when it is State Plan Medicaid versus “long term care” Medicaid!
Explore a Special Needs Trust  
Like The Arc of Northern VA’s Pooled Trust

A SNT is a legal document designed to:  
Provide benefit to & protect the assets of a person with a disability while allowing the individual to be qualified for and receive government benefits, such as Medicaid, Medicaid Waivers and Supplemental Security Income.

For more information, contact:  
Tia Marsili, Director of Trusts  
tmarsili@thearcofnova.org  
(703) 208-1119 x115  
www.thearcofnovatrust.com
Let’s Talk About Services

Bear in mind, services will vary by person based upon need. Most people use multiple services and have changes in their support plans over time.
<table>
<thead>
<tr>
<th>Service Category and Description</th>
<th>Community Living Waiver-Designed for people with higher needs</th>
<th>Family Supports Waiver-Designed for people with moderate needs</th>
<th>Building Indep. Waiver-Designed for people with lower needs</th>
<th>EDCD Waiver-For people with medical and disability needs</th>
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</thead>
<tbody>
<tr>
<td>Residential Group Homes- 24/7 staffed home where 3+ people with disabilities live. Homes usually have 4-7 residents and staff that rotate around the clock on shifts.</td>
<td>X</td>
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<tr>
<td>Residential Shared Living- Individual lives with someone without a disability who is reimbursed for room and board in exchange for companionship</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Residential Independent Living- Supports brought into the home focused on skill building and preparing for greater independence</td>
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<td>X</td>
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<tr>
<td>Residential Sponsored Residential- Option where person with disability lives with a paid caregiver in the home of the caregiver.</td>
<td>X</td>
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<tr>
<td>Residential Supported Living- Residence owned by a support provider that offers up to 24/7 help with support needs</td>
<td>X</td>
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<tr>
<td>Day &amp; Employment</td>
<td>Community Engagement- Service focused on ability to improve skills for employability and independence using the community as the environment</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Day &amp; Employment</td>
<td>Supported Employment (Group and Individual)- Supports on the job to allow people to work in competitive employment</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Day &amp; Employment</td>
<td>Day Support- Either center or community based supports that are typically unpaid and involve skill development</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Day &amp; Employment</td>
<td>Workplace Assistance Services- Services for someone who needs to fill the gap between initial job training and following along services</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Day &amp; Employment</td>
<td>Community Coaching- 1:1 support to build a specific skill or break a barrier to employment and community engagement</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Day &amp; Employment</td>
<td>Benefits Planning- Services to help individuals receiving social security benefits understand the impact of work on those benefits</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td><strong>In Home</strong></td>
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<tr>
<td>In Home</td>
<td>In-home Support Services (up to 24/7)- 1:1 services in the home focused on life skills</td>
<td>X</td>
<td>X</td>
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<tr>
<td>In Home</td>
<td>Companion Services- 1:1 service in the home focused to monitor for safety</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>In Home</td>
<td>Respite- Supplemental annual hours of personal care to provide relief to the unpaid caregiver</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>In Home</td>
<td>Environmental Modifications- Up to $5000 per year to modify a primary home or vehicle to better adapt it to the needs of the individual</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>In Home</td>
<td>Personal Emergency Response System- Electronic safety monitoring system to link to emergency services</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
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<tr>
<td>Community Supports</td>
<td>Electronic Home-Based Supports- Good and services to be used in the home for greater independence in lieu of paid staff</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Community Supports</td>
<td>Assistive Technology- Up to $5000 per year on portable items to assist the individual with safety, communication, and independence</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Community Supports</td>
<td>Crisis Supports (center and community based)- crisis prevention and stabilization</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Community Supports</td>
<td>Community Guide- Direct assistance in promoting and developing community relationships that promote integration and self-determination</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Community Supports</td>
<td>Non-medical transportation- Reimbursement for transport to locations associated with an individual’s support plan and goals</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td><strong>Medical</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Private Duty Nursing- 1:1 continuous care nursing for people with complex medical needs</td>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>Skilled Nursing- Intermittent nursing related to a specific medical care need</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
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<tr>
<td>Therapeutic Consultations- Limited consultations with therapists in qualifying areas</td>
<td>X</td>
<td>X</td>
<td></td>
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<tr>
<td>Transition Services- Funding and supports to assist people with leaving institutional settings</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
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<tr>
<td>Individual and Family/Caregiver Training-Education and training on disability related issues for the primary caregiver or family of the individual</td>
<td></td>
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<td>X</td>
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</tr>
</tbody>
</table>
Agency and Consumer Directed Staffing Options

- **Agency Directed**
  - Care that is rendered by a Medicaid approved agency
  - The agency hires and manages and pays the workers
  - The agency submits the paperwork necessary for payment to DMAS
  - Available with all Waivers

- **Consumer Directed**
  - Workers are directly hired and managed by the individual receiving the Waiver support services
  - The individual, or their family if the client is a child or is unable to manage the task, is responsible for managing all aspects of the employment relationship, including recruiting, hiring, training, supervising, ensuring payment through DMAS, and firing if needed
  - There is a service facilitator to assist you with this process
  - Available with all Waivers
Screening Contacts for all Developmental Disability Waivers

Screenings are conducted by the local CSBs

Arlington: 703-228-1700
Alexandria: 703-746-3400
Fairfax: 703-324-4400

Steps:
1) Call your local CSB to complete a screening process
2) Complete application they send to you
3) Complete the process with the VIDES assessment, in person planning meeting, and get a letter confirming you’re on the waiting list
**Disability Waiver Waiting Lists**

- All of the DD Waivers have a waiting list
- *Wait time is unpredictable since it is based upon urgency of need*
- People’s urgency is constantly in flux
- The waiting list is managed by regional Waiver Slot Assignment Committees who review applications when services are available
- There should be emergency reserve Waivers that are accessed when APS/CPS involvement is present and/or when primary caregiver(s) have passed away and the person needs help to care for themselves
Waiting List Tiers

Priority One Status
Will need waiver services within one year and meets specific criteria
(Supplemental Critical Needs Summary Questions will be asked)

Priority Two Status
May require waiver services in one to five years and meets specific criteria

Priority Three Status
May not present for waiver services in over five years as long as the current supports and services remain

*DBHDS Slide.
NOTE- You can appeal your tier if it doesn’t reflect your need
While on the waiting list what else can you do?

Depending on level of need and eligibility criteria, you can apply for other waivers:

- You **CAN** be the DD Waiver list **AND** Receive or be on the list for the Elderly or Disabled with Consumer Directed Services Waiver (EDCD), Day Support or the Technology Waivers
- Call your county for case management and other locally funded services or resources that may be available to you.

Utilize the Individuals and Families Support Program Funding
- Up to $1,000 per year for supports to serve you in the community
- Last opened on September 15, 2015

Access REACH Crisis Services- 24 hour crisis response and respite for people with ID/DD and behavioral or mental health needs who are over 18 years old
- 885-897-8278
Screening Processes: EDCD Waiver

EDCD Waiver

- Call your local Department of Social Services for intake
  - Alexandria (703-746-5700), Arlington: Birth to 3 (703) 228-1640; 3yrs to 21yrs (703) 228-1510; 21yrs and older (703) 228-1769, Fairfax (703-324-7500)
- Set up Screening and intake appointment with Social Worker
- Schedule visit with the nurse
- Meet with local County case worker
- Meet with Home Health Care Agency or Service Facilitator

Waiting List

- None – just the process of intake
Screening Processes: Technology Assisted Waiver

Technology Assisted Waiver

- DMAS conducts the screenings for individuals under the age of 21 who request Tech Waiver services
- Call 804-786-1465 or local Health Department or Department of Social Services
- If hospitalized, the hospital social worker or discharge planner can assist in coordinating a screening with DMAS

Waiting List

- None – just the process of intake
Once You Receive a Waiver

- You will be contacted by the Community Services Board and should be offered a choice of Case Manager
- You will take the Supports Intensity Scale (SIS) assessment then and every three years
- You will develop a plan for services you need
Your SIS Score Gives a Support Level 1-4

<table>
<thead>
<tr>
<th>Levels Brief Description</th>
<th>Scales ABE</th>
<th>Medical Support</th>
<th>Behavioral Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Least Support Needs</td>
<td>0 to 22</td>
<td>0 to 6</td>
<td>0 to 6</td>
</tr>
<tr>
<td>Modest or Moderate Support Needs</td>
<td>23 to 30</td>
<td>0 to 6</td>
<td>0 to 6</td>
</tr>
<tr>
<td>Least/Moderate Support Needs with Some Behavioral Support Needs</td>
<td>0 to 30</td>
<td>0 to 6</td>
<td>7 to 10</td>
</tr>
<tr>
<td>Moderate to High Support Needs</td>
<td>31 to 36</td>
<td>0 to 6</td>
<td>0 to 10</td>
</tr>
<tr>
<td>High to Maximum Support Needs</td>
<td>37 to 52</td>
<td>0 to 6</td>
<td>0 to 10</td>
</tr>
<tr>
<td>Extraordinary Medical Support Needs</td>
<td>Any</td>
<td>7 to 32 verified extraordinary medical risk</td>
<td></td>
</tr>
<tr>
<td>Extraordinary Behavioral Support Needs</td>
<td>Any</td>
<td>Any</td>
<td>11 to 26 verified danger to others or extreme self injury risk</td>
</tr>
</tbody>
</table>
Most People will be in Middle Tiers

<table>
<thead>
<tr>
<th>Tier 4</th>
<th>Tier 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extraordinary Behavioral Support Needs</td>
<td>High Support Needs</td>
</tr>
<tr>
<td>1.5% = 173 individuals</td>
<td>38.7% = 4452 Individuals</td>
</tr>
<tr>
<td>Extraordinary Medical Support Needs</td>
<td>Mild/Moderate Support Needs + Some Behavioral Support Needs</td>
</tr>
<tr>
<td>6.9% = 794</td>
<td>2.4% = 276 individuals</td>
</tr>
<tr>
<td>Severe Support Needs</td>
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<tr>
<td>5.3% = 610 individuals</td>
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</table>

<table>
<thead>
<tr>
<th>Tier 2</th>
<th>Tier 1</th>
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<tbody>
<tr>
<td>Moderate Support Needs</td>
<td>Mild Support Needs</td>
</tr>
<tr>
<td>37.9% = 4360 individuals</td>
<td>7.3% = 840 individuals</td>
</tr>
</tbody>
</table>

*Individually negotiated rates are possible for people with truly exceptional needs*
For some services, SIS affects reimbursement rates.

Reimbursement increases based on:

The support need level
Reimbursement Decreases with More People in a Housing or Employment Situation

Reimbursement decreases based on:

The size of the licensed home or number of people supported

*This graphic and the previous graphic were created by The Arc of Virginia*
Become a Member of The Arc of Northern Virginia!

Follow our lead in advocating for the needs of your loved one.

www.thearcofnova.org

Sign up for our newsletter!
Where Do I Go For More Information?

- **All Waivers:**
  Waiver Hotline - 1-844-603-9248

- **Developmental Disability Waivers Website**
  The Arc of NOVA’s webpage- [https://thearcofnova.org/programs/waivers/](https://thearcofnova.org/programs/waivers/)

- **Local Community Services Board**
  - Arlington: 703-228-1700
  - Alexandria: 703-746-3400
  - Fairfax: 703-324-4400
Thank you!

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703-208-1119  Ext 116