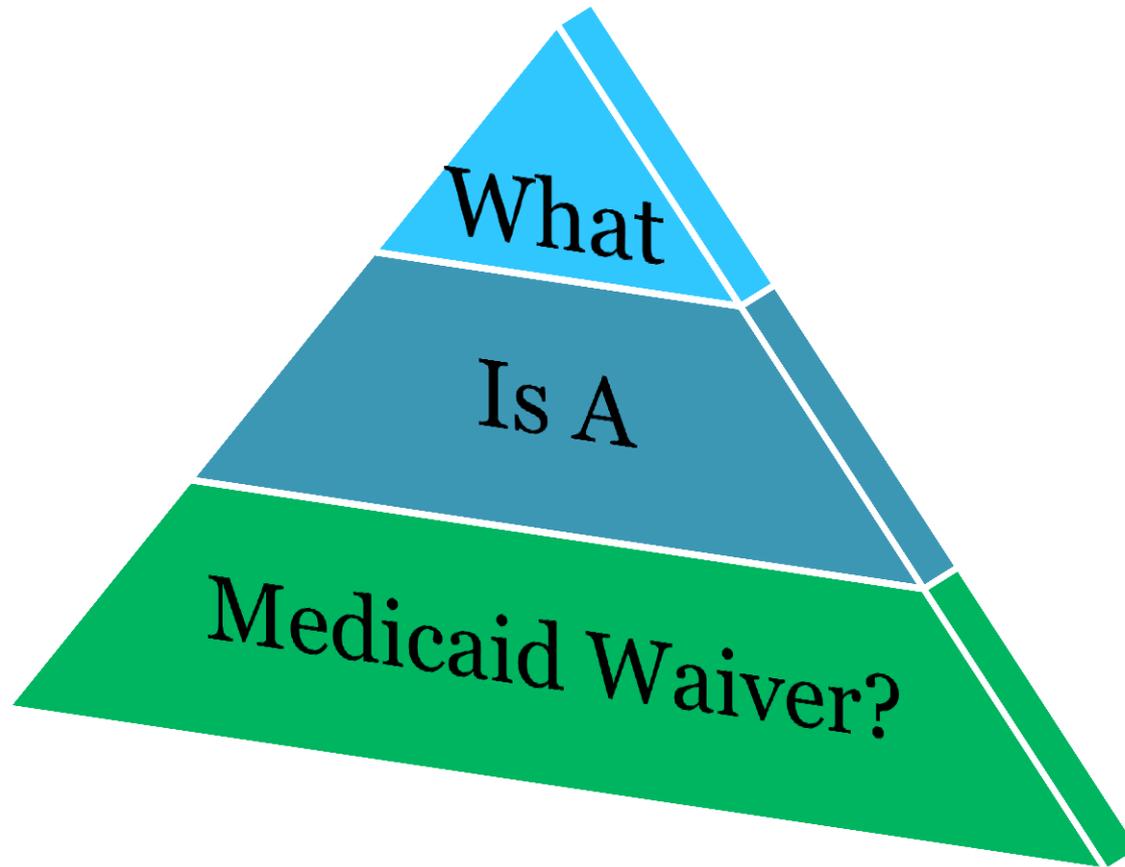




Improving lives THROUGH supports and services THAT FOSTER self-determination.



A Brief History of DD

- 👤 Started with Institutions
 - 👤 Called schools or homes for the “feebleminded” or “mental deficiencies”; allowed segregation in an institution.
- 👤 Individuals integrated into classrooms
- 👤 Development of Group Homes in the Community
- 👤 Development of new residential options under waiver
- 👤 Funding of in-home services to avoid residential options

Centers for Medicare and Medicaid Services (CMS)

-  A federal government agency under Health & Human Services (HHS) that assists in providing health coverage through the Medicare, Medicaid and Children's Health Insurance Program (CHIP).

SB40 Board

-  SB40 (1969) allowed counties to pass a tax on personal property to support services for individuals with a developmental disability. Tax dollars generated are managed by a nine member public board in the county.

Individualized Supported Living (ISL)

-  Homes designed to serve one to four individuals located in a residential, single-family neighborhood. A supervisor coordinates all individuals' care, staff schedules, and community integration. Individuals living in ISL homes are provided up to 24 hours per day support based upon the needs of the individual(s) living in the home.

Medicaid Waivers

-  CMS and state partnerships that allow states the opportunity to test new or existing ways to deliver and pay for health care services. There are four types of waivers, DDD only uses the 1915(c) home and community-based waiver.

1915 (c) Home and Community-Based Waiver

-  Allows states to deliver long-term care services in home and community settings rather than institutional settings like nursing homes and ICF/ID.

Intermediate Care Facilities for Individuals with Intellectual Disability (ICF/ID)

-  An optional Medicaid benefit that enables states to provide comprehensive and individualized health care and rehabilitation services to individuals to promote their functional status and independence. ICF/ID is only available for individuals in need of, and receiving active treatment.

History of Medicaid Waiver

President Lyndon Johnson signed Medicare and Medicaid into law in 1965.



Former President Harry Truman received the first Medicare card.



Medicaid's purpose is

'to furnish rehabilitation and other services to help such families and individuals attain or retain capability for independent or self care'

People with developmental disabilities originally had to live in habilitation centers (hospital like settings) to receive funding.

History of Medicaid Waiver

The Omnibus Budget Reconciliation Act of 1981 added a new section to the Social Security act, Section 1915 (c), authorizing state Medicaid agencies to apply for home and community based waivers.

People no longer had to live in institutions in order to receive Medicaid – they could take those dollars into the community.

Missouri's first waiver for people with developmental disabilities was implemented in 1988.

Medicaid funding in MO consists of matching approximately 36 percent state general revenue dollars with approximately 64 percent federal dollars.

The Partnership for Hope waiver, approved by CMS, was created with a new funding stream where the SB40 pays 18 percent of the match and the state pays 18 percent of the match.

What is a 1915(c) waiver?

- 👤 Result of a special arrangement between the state and federal government that allows the state to use Medicaid funding for specialized services provided only to a target group of people and not to all people with Medicaid eligibility.
- 👤 DDD waiver service is for a targeted group of individuals who have developmental disabilities.
- 👤 The state determines:
 - 👤 The number of people served;
 - 👤 What services are covered;
 - 👤 How much it will spend on services in each waiver.

Process for Accessing Waivers



- 👤 Must be determined eligible for DD services
- 👤 Must be Medicaid eligible
 - 👤 Must have needs that regular state plan services cannot meet
- 👤 Must have at least three functional levels of need
- 👤 No waitlist—waiver slots authorized as requested
 - 👤 If there is a waitlist, individuals' level of need is determined. When there is a waitlist, slots assigned by need.

MO Waivers

Administered by DMH/DD



1988

Comprehensive Waiver

1995

MO Waiver for Children with Developmental Disabilities (“Lopez” Waiver/ AKA MOCDDS)

2003

Community Support Waiver

2009

Waiver for Children with
Autism Spectrum Disorders

2010

Partnership for Hope Waiver

Comprehensive Waiver

Comprehensive Waiver

Began in
1988

28
services
included;
No cap

Only
waiver
that
includes
residential
services
(ISL,
Group
Homes,
Shared
Living)

Number
currently
served:
8,350

Up to
8,782
persons
can be
served in
this
waiver per
fiscal year

Meet
ICF/DD
Level of
Care

Missouri Children with Developmental Disabilities Waiver



Also called Lopez Waiver

Missouri Division of DD is operating agency

Began in 1995	14 services included; No cap	For children up to age 18	Ineligible for MO HealthNet due to the deeming of parental income and resources. Enables children to qualify for MO HealthNet disregarding parental income and resources	Child lives with family	Has a permanent and total disability	Meet ICF/DD Level of Care	Up to 366 persons can be served per waiver year	Number currently served: 320
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Autism Waiver



Autism Waiver

Began in 2009	13 services included; \$22,000 cap	Serves persons between the ages of 3 and 18	Have a diagnosis of Autism Spectrum Disorder as defined in the most recent edition of the Diagnostic and Statistics Manual of Mental Disorders, American Psychiatric Association.*	Meet ICF/DD Level of Care	Up to 175 persons can be served per waiver year	Number currently served: 142
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**Includes Autistic Disorder, Asperger's Syndrome; Pervasive Developmental Disorder, Not otherwise specified; Childhood Disintegrative Disorder; and Rett Syndrome*

Community Support Waiver



Community Support Waiver

Began in
2003

27 services
included – same
as
Comprehensive
Waiver but no
residential
services

No age
limit

Meet
ICF/DD
Level of
Care

Has an
individual
cost limit of
\$28,000/year
(exception to
cost limit can
be granted on
case-by-case
basis)

Up to
2,254
persons can
be served
per waiver
year

Number
currently
served:
1,937

Partnership for Hope Waiver



Partnership for Hope Waiver

Began
October
2010

Includes
20
services

Available in
the 103
counties
participating,
plus City of
St. Louis

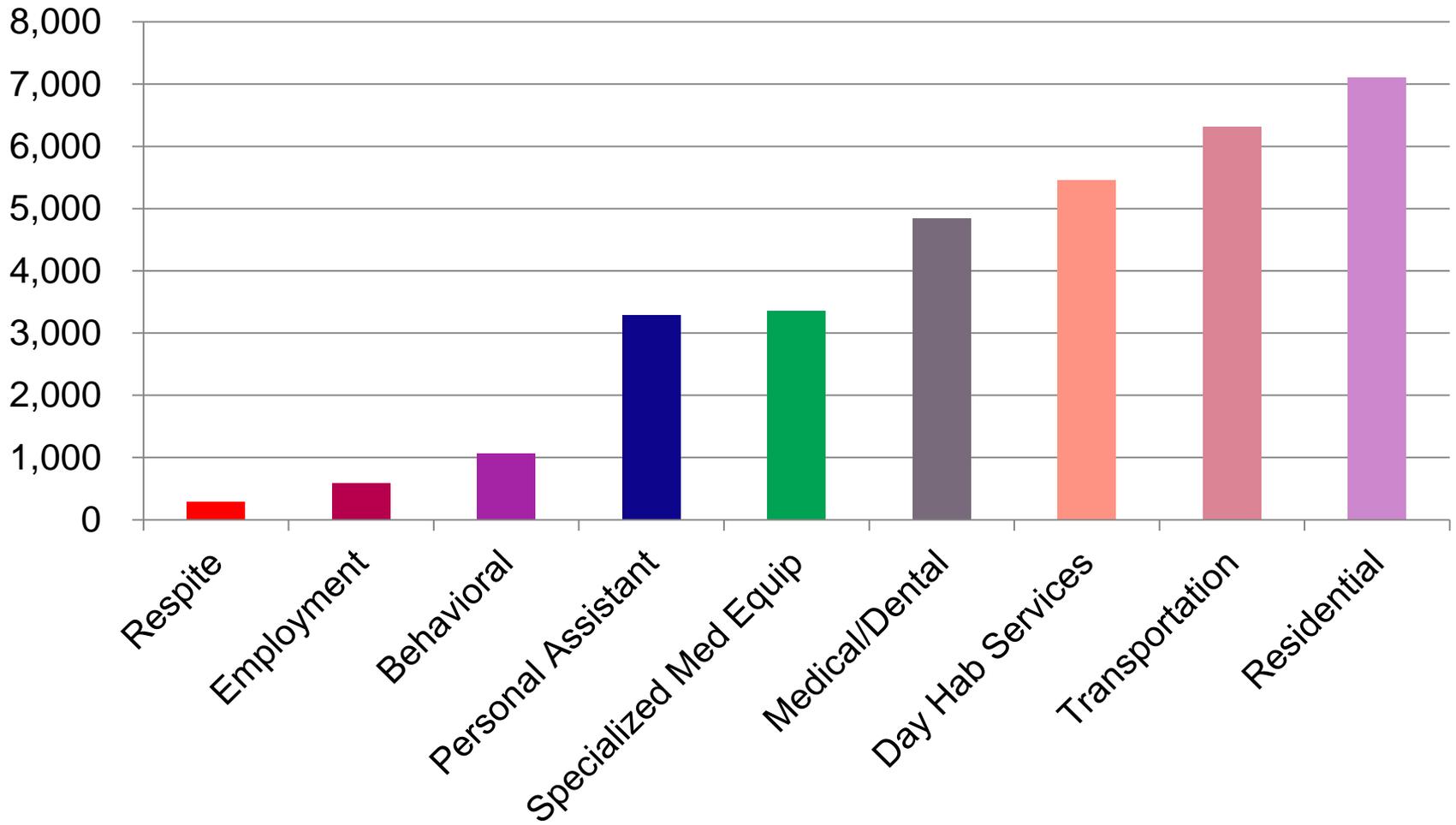
Annual cost
cap of
\$12,000
(exception to
cost limit
can be
granted on
case-by-case
basis up to
\$15,000)

Meet
ICF/DD
Level of Care

Serves up to
3,156
persons
annually

Number
currently
served:
2,512

Waiver Services



Waiver Assurances (Required by CMS)

1 Level of Care

2 Service Plans

3 Health and Welfare

4 Financial Accountability

5 Administrative Authority

Level of Care (LOC) – Waiver Assurance

- 
- An evaluation for LOC is provided to all applicants

- 
- The LOC of enrolled participants are reevaluated at least annually or as specified in the approved waiver

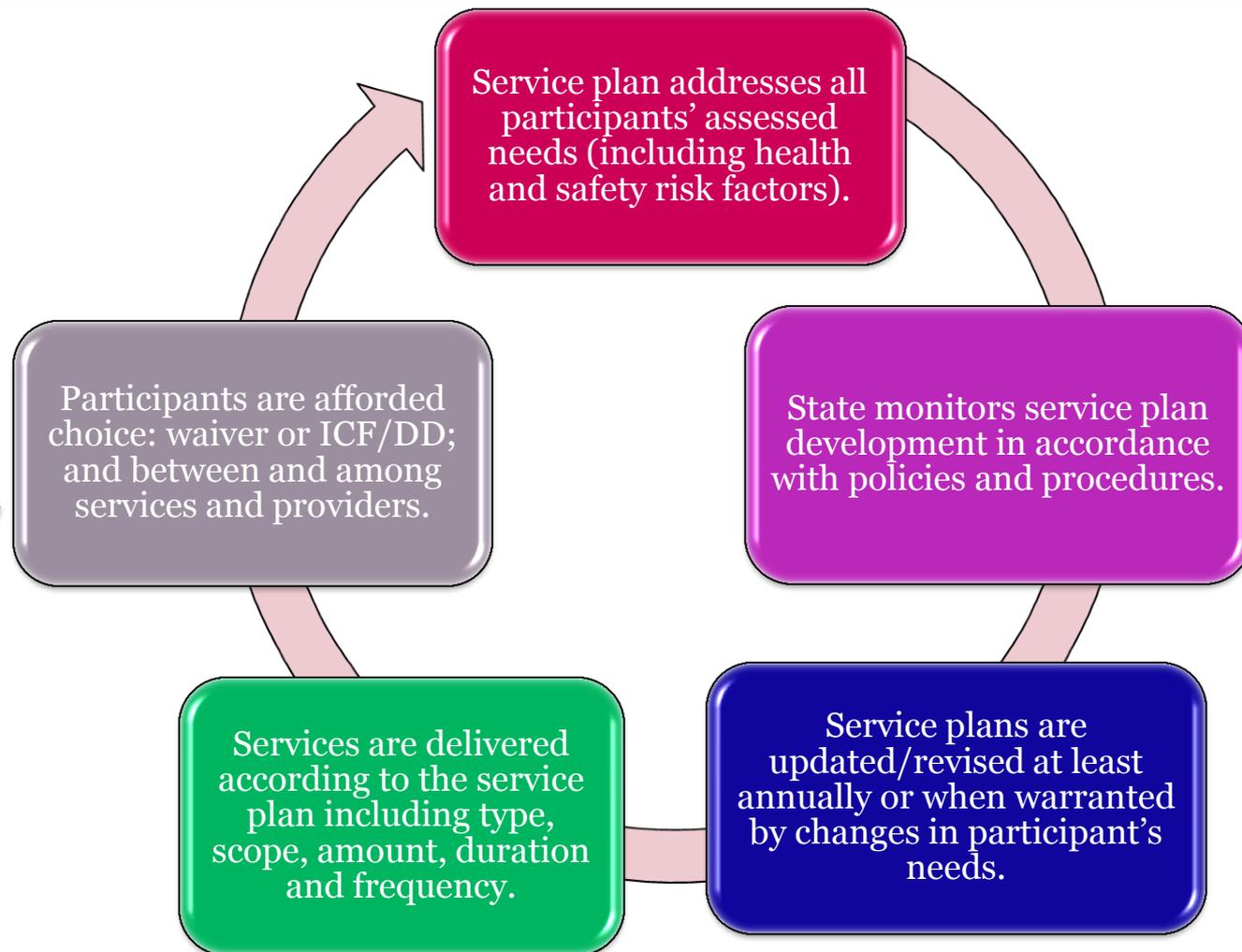
- 
- The process and instruments described in the approved waiver are applied appropriately and according to the approved description to determine participant level of care

Service Plans

– Waiver Assurance

Who might be involved in service planning:

- *Individual*
- *Parent*
- *Guardian*
- *Support Coordinator*
- *Providers*
- *Natural Supports*
- *Neighbors*
- *Friends*
- *Other family*



Provider Qualifications

– Waiver Assurances



- 👤 License or Certification either from DMH or from a professional accreditation organization
- 👤 Professional license, if applicable
- 👤 Completed appropriate training, as determined by the department and the individual's planning team
- 👤 Guarantee appropriate supervision of staff
- 👤 Cannot be individuals spouse, parent if a minor child or legal guardian

Waiver Assurances

Health and Welfare

- ❖ State, on an ongoing basis, identifies, addresses and seeks to prevent the occurrence of abuse, neglect and exploitation.
- ❖ Adequate standards for all types of providers.

Financial Accountability

- ❖ State financial oversight exists to assure claims are coded and paid in accordance with reimbursement methodology specified in the approved waiver.

Administrative Authority

- ❖ Medicaid agency retains ultimate administrative authority and responsibility for the operation of the waiver program by exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies and contracted entities.

State Plan

MO HealthNet Services

Before waiver services are authorized, first must ensure that state plan MO HealthNet services are accessed when those services can meet the individual's need.



Examples of State Plan services:

- ✓ Doctor's Office visits
- ✓ Durable medical equipment
- ✓ Personal care
- ✓ Pharmacy
- ✓ Hospital
- ✓ Home health care, etc.



What is a Senate Bill 40 Board?

In 1969, Senate Bill 40 (SB40) gave counties in Missouri the ability to vote to tax themselves a small percentage of their personal property taxes to be used for developmental disability services. According to the ballot language, the tax can be used ‘to maintain sheltered workshops, residential facilities, and other related services.’

86 counties have voted to tax themselves and establish Senate Bill 40 Boards, as well as the City of St. Louis (SB240).

By statute, each SB40 Board must establish a nine member board which shall include at least two members who are related by blood or marriage within the 3rd degree to a ‘handicapped’ person and four of whom shall be public members.

The SB40 Boards take in approximately \$60 million from their county taxpayers. Approximately \$10 million is spent on Medicaid match to provide services for individuals who are Medicaid waiver eligible.