Medicaid Home and Community-Based "Comprehensive" Waiver Overview

What is a HCBS Medicaid waiver?

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- Medicaid Home and Community-Based Services (HCBS) Waiver programs help provide services to participants who would otherwise be in an institution, nursing home, or hospital, to receive long-term care in the community.

- Medicaid funding for the HCBS waivers in Missouri consists of matching approximately 36 percent state general revenue dollars with approximately 64 percent federal dollars.

- The state determines for each waiver:
  - Targeted population;
  - The number of participants served;
  - What services are covered;
  - How much it will spend on services in each waiver.

Comprehensive Waiver

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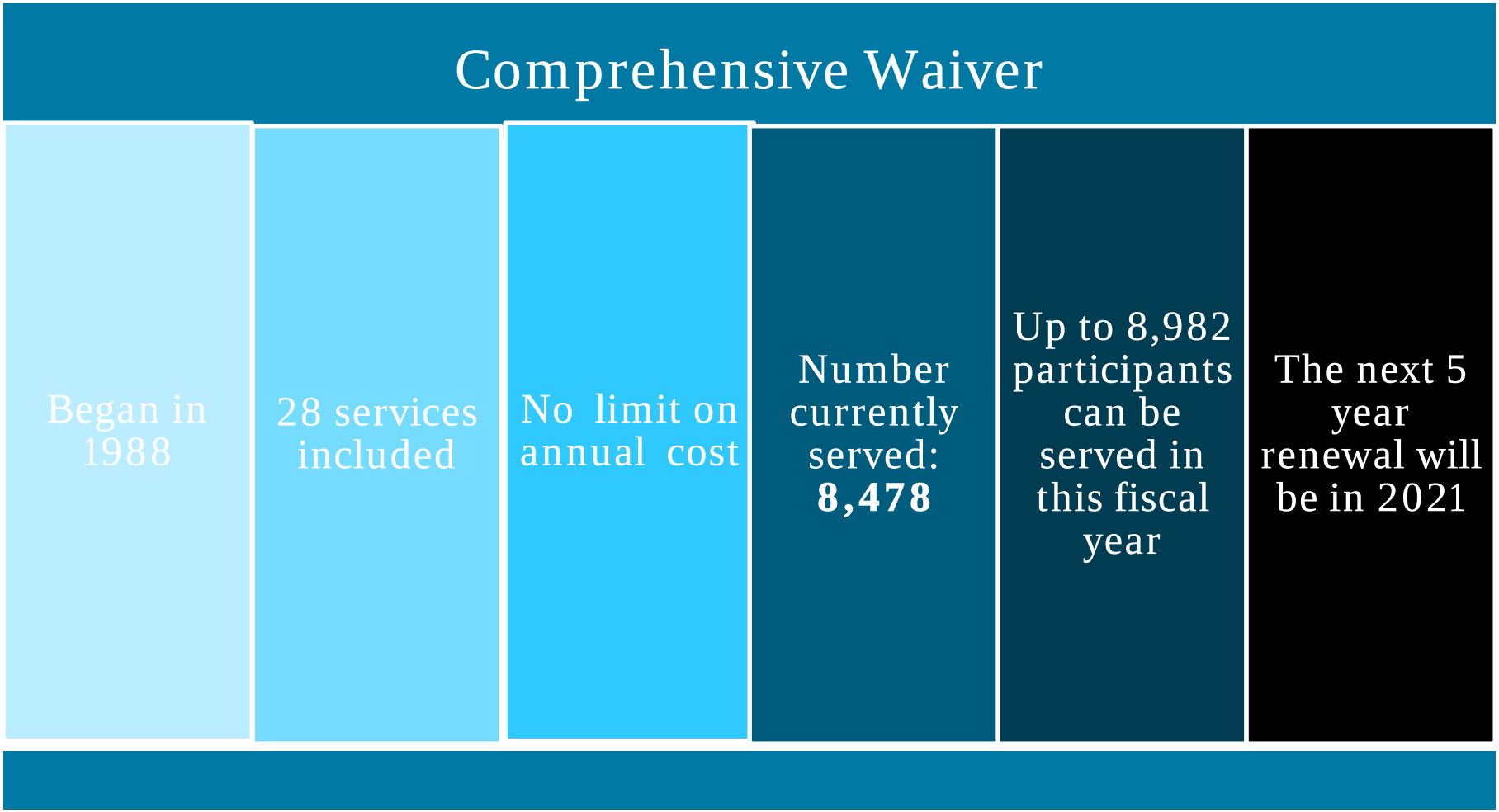

Important Facts About the Comprehensive Waiver

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This waiver serves over 8,400 participants and does not have an individual cost cap.

The average cost for participants is under $80,000 annually.

This is the only waiver that provides residential services:

Group Home;

Shared Living;

and Individualized Supported Living services.

What you need to know

Current funding sources allow the Division to assign Comprehensive waiver slots to participants with a PON score of 12. Those with a PON of less than a 12 are added to the wait list, or receive services through other waivers.

Not every participant receives residential services, some live with their families or on their own and receive support services.

What You Need to Know Continued...

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- Participants who have needs that cannot be met in the Community Support waiver, which has an annual cap of $28,000 in services, could be eligible for participation in the Comprehensive waiver.

- The Division tries to meet the participant's needs in other waivers prior to entry in the Comprehensive waiver. The other Division of Developmental Disabilities (DD) waivers provide the same services, except residential and dental.

- The Division's goal is to support participants in the most integrated setting in their community as long as possible.

State Plan
MO HealthNet Services

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- For items and services that are identified as medically necessary, MO HealthNet State Plan must first be utilized before waiver services are authorized.

- Keep in mind, you have to consider if the identified need is driven by safety, convenience or medical necessity.

- **State Plan services include but not limited to:**
  - Non-Emergency Medical Transportation (NEMT)
  - Durable medical equipment
  - Personal care
  - Doctor's Office visits
  - Home health care, etc.
  - Therapies

Comprehensive Waiver Services

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- Applied Behavior Analysis
- Assistive Technology
- Career Planning
- Community Integration
- Community Specialist (allows self-direction option)
- Community Transition
- Counseling
- Crisis Intervention
- Day Habilitation
- Environmental Accessibility Adaptations/Vehicle Modifications
- Group Home
- In Home Respite
- Individualized Skill Development
- Individualized Supported Living
- Job Development
- Occupational Therapy
- Out of Home Respite
- Person Centered Strategies Consultation
- Personal Assistant (allows self-direction option)
- Physical Therapy
- Pre-Vocational
- Professional Assessment and Monitoring (Registered Nurse, Licensed Practical Nurse, Registered Dietitian)
- Shared Living
- Specialized Medical Equipment and Supplies (Adaptive Equipment)
- Speech Therapy
- Support Broker
- Supported Employment
- Transportation

THINGS TO KEEP IN MIND ABOUT COMPREHENSIVE WAIVER SERVICES

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- Group Home participants who have health care needs that exceed 1.25 hours/month may have additional hours of nursing services requested through the RN/LPN oversight service with the new procedure code modifier "HQ."

- ISL Transportation service procedure code T2001 has “HQ” modifier to show specifically the agency provided and billed transportation.

- Provider owned and controlled group home, Shared Living and/or ISL settings have six additional HCBS requirements for those settings.

THINGS TO KEEP IN MIND ABOUT ALL DD WAIVERS

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- Participants may qualify for both the Department of Health and Senior Services (DHSS) and Department of Mental Health (DMH) DD Waivers; however, a participant can only "receive services in one waiver at a time." The Support Coordinator should work with DHSS to ensure the participant isn't in two waivers at the same time.
- A participant cannot Consumer-Direct State Plan (Personal Care) and Self-Direct DD Waiver services (Personal Assistance or Community Specialist) at the same time.
- Home Modifications (EAA=Environmental Accessibility Adaptations) may not be furnished to adapt living arrangements that are owned or leased by providers of waiver services.
- A participant must have an ongoing monthly waiver service need that is documented in their Individualized Supported Plan (ISP). If the need for services is less than monthly, the participant requires regular monthly monitoring which must be documented in the ISP.

MO HealthNet Record Reviews

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- CMS requires MO HealthNet, the Medicaid Agency, to provide oversight to the Division of DD implementing the DD waivers. MO HealthNet provides the Division of DD a statistically valid sample of participants for the annual waiver record review.
- These reviews are completed to monitor compliance and meet required CMS expectations.
- The areas that MO HealthNet review for compliance are as follows:
  - Level of Care (LOC) determinations
  - ISPs
  - Medicaid Waiver Provider Services Choice Statement
  - Assessment used to determine LOC
  - CIMOR service authorizations
  - Monthly and/or quarterly reviews.

CMS requires the Division to report on the 5 Waiver assurances

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- Level of Care
- Service Plan
- Health and Welfare
- Financial Accountability
- Administrative Authority

Provider Qualifications – Waiver Assurances

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- 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 individual's spouse, parent (if a minor child) or legal guardian

RESOURCES

MISSOURI DIVISION OF DEVELOPMENTAL DISABILITIES

- Comprehensive Waiver Application

https://dmh.mo.gov/dd/progs/waiver/docs/cmsapprovedcompwaiveramendment.pdf

- Provider Manual

http://manuals.momed.com/collections/collection_dmh/print.pdf

- Federal Programs Unit

https://dmh.mo.gov/dd/progs/

- HCBS Transition Plan

https://dmh.mo.gov/dd/hcbs.html

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

Thank you!