

An Introduction to Iowa's Home- and Community-Based Services July 29, 2022

Objectives

- An understanding of the HCBS waiver basics and philosophy of services
- Waiver and Habilitation eligibility
- HCBS programs
- Allowable Services under HCBS programs
- Understand various roles in the process of obtaining waiver services



WHAT IS A WAIVER?



What is an HCBS Waiver?

- States can chose to waive certain Medicaid program requirements under HCBS Waivers, including :
 - Statewideness: Allows States to target waivers to areas of the state where the need is the greatest
 - Comparability of services: Allows states make waiver services available to certain groups at risk of institutionalization
 - Income and resource rules applicable in the community: Lets States provide Medicaid to people who would otherwise be eligible only in an institutional setting, often due to the income and resources of a spouse or parent. States can also use spousal impoverishment rules to determine financial eligibility for waiver services.



What is an HCBS Waiver?

- The HCBS waiver program began in 1981 as a means to correct the "institutional bias" of Medicaid funding
 - Prior to this, federal funding was only available to support individuals living in institutions
- HCBS plays an important role in states' efforts to achieve compliance with the Americans with Disabilities Act (ADA) and the Olmstead decision
- The Supreme Court held that the unjustified institutional isolation of people with disabilities is a form of unlawful discrimination under the ADA



What is an HCBS Waiver?

IAC 441-83 Medicaid Waiver Services

Preamble: Medicaid waiver services are services provided to maintain persons in their own homes or communities who would otherwise require care in a medical institution, including support for persons to seek and maintain employment in the community. Provision of these services must be cost-effective. Services are limited to certain targeted client groups for whom a federal waiver has been requested and approved. Services provided through the waivers are not available to other Medicaid recipients as the services are beyond the scope of the Medicaid state plan.



HCBS Waiver Services vs. State Plan Habilitation Services

- Habilitation and waiver services have similar criteria
- Habilitation services do not have a wait list
- Habilitation services are determined by needs and risk-based criteria versus level of care



Waiver Basics

- Support individualized services
- Draw down federal money to fund needed services
- Serve adults and children based on the specific waiver criteria
- HCBS programs provide Medicaid funding for community-based services
- Requires a set of criteria be met in order to be eligible for HCBS enrollment
- Allow the state to furnish services to members in their communities and avoid institutionalization



Waivers are not...



Academic education

Replacement of parental responsibility

- Cadillac service
- The only funding source



ACCESSING INFORMATION



Accessing Iowa Administrative Code (IAC)

To access the waiver rules, go to the following website address:

https://www.legis.iowa.gov/law/administrativeRules/agencies

- Scroll down to the appropriate chapter
- *** 441 Human Services Department**

Chapter 77 - Provider Qualifications and Conditions of Participation

- Chapter 78 Scope and Service Description
- Chapter 79 Reimbursement
- Chapter 83 Member Eligibility and CCO
- Chapter 90 Case Management

Waiver Process and Eligibility

- Centers for Medicare and Medicaid Services (CMS) requires states to complete an application for each waiver offered in the state
- CMS reviews applications and determines approval
- Individual states operate their own waiver programs
- Member must meet income guidelines
- Member must meet institutional level of care



Non-Financial Eligibility

Requirements for most Medicaid members and applicants

Additional requirements for residents of Medical Institutions and HCBS Waiver members and applicants

- Iowa Residency
- Social Security Number or application for one
- U.S. Citizen or eligible immigration status
- Proof of identity

Age

- Disability (when used as the basis for eligibility)
- Level of Care met
- Been in an institution for 30 consecutive days (if in the 300% eligibility group)

https://dhs.iowa.gov/ime/about/advisory-groups/townhall



Roles

Income Maintenance Worker – reviews the members application and determines financial eligibility

<u>Case Manager or Integrated Health Home</u> – reviews the member's need for services and monitors implementation of the Person Centered Service Plan (PCSP)

Iowa Medicaid Quality Improvement Organization (QIO) – reviews the member's LOC based on assessment tool and accompanying information; HCBS unit works with provider quality

<u>**Providers**</u> – agencies or persons enrolled/certified to provide HCBS services to members



Accessing Resources from Iowa Medicaid

 General HCBS information: <u>https://dhs.iowa.</u> <u>gov/ime/member</u> <u>s/medicaid-a-to-</u> <u>z/hcbs</u>

 iowagov
 Services
 Agencies
 Social
 Q

 iowagov
 Department of HUMAN SERVICES
 Q Search

 Assistance Programs
 Family Services
 Health Care
 Mental Health and Disability Services
 About DHS
 Apply or Appeal
 Report Abuse and Fraud

 Home > Member Services > Medicaid Programs > Home- and Community-Based Services (HCBS)
 Home- and Community-Based Services

Who Receives Medicaid?

What Services Are Available?

Find a Provider

Member Resources

Rights and Responsibilities

Medicaid Programs

Contacts

About Iowa Medicaid

Provider Services

Home- and Community-Based Services (HCBS)



The Iowa Home- and Community-Based Services (HCBS) are Medicaid programs that give you more choices about how and where you receive services. Home- and Community-Based Services are for people with disabilities and older Iowans who need services to allow them to stay in their home and community instead of going to an institution. There are several programs that provide Home- and Community-Based Services. The program names are HCBS Waivers (there are seven waivers),



Accessing Resources from Iowa Medicaid

Specific information for those who are applying or referring includes: Informational packets and a brochure

THE SEVEN HCBS WAIVERS

- 1. Health and Disability (HD) Waiver Information Packet: In English / En Espanol
- 2. AIDS/HIV (AH) Waiver Information Packet: In English / En Espanol
- 3. Elderly (E) Waiver Information Packet: In English / En Espanol
- 4. Intellectual Disability (ID) Waiver Information Packet: <u>In English</u> / <u>En Espanol</u>
- 5. Brain Injury (BI) Waiver Information Packet: In English / En Espanol
- 6. Physical Disability (PD) Waiver Information Packet: <u>In English</u> / <u>En Espanol</u>
- 7. Children's Mental Health (CMH) Waiver Information Packet: In English / En Espanol
- State Plan HCBS Habilitation services: <u>HCBS Habilitation Information Packet</u>
- If you wish to learn more about the HCBS Waiver Program, read the HCBS Waiver Program brochure, "<u>Are Home and Community Based Services Right for You?</u>"



Accessing Resources from Iowa Medicaid

- Specific information for providers includes:
- <u>HCBS Provider Manual</u> manual that summarizes Iowa Administrative Code
- HCBS Provider Contact Page
 - Resources to help you find an HCBS Provider
- HCBS Specialist Oversight Regions (Map)
- HCBS Specialists by County



ELIGIBILITY AND SERVICES



Program Comparison

LTSS Program Comparison Chart

- Provider Enrollment
- Development of service plan
- Determination of level of care (LOC) and what the level of care required for the waiver
- Determination of financial eligibility
- Where to apply
- Target Population

IL 2350-MC-FFS - Assessment Tools For Hcbs



Health and Disability Waiver Eligibility Requirements

- Under age 65
- Supplemental Security Income (SSI) determined to be blind/disabled
- Level of Care
 - Nursing Facility
 - Skilled Nursing Facility
 - Intermediate Care Facility/Intellectual Disability



HD Waiver Allowable Services

- Homemaker
- Home Health Aide
- Adult Day Care
- Respite Care
- Consumer Directed
 Attendant Care (CDAC)
- Home and Vehicle
 Modification

- Home-delivered Meals
- Counseling
- Interim Medical Monitoring and Treatment
- Nursing
- Nutritional Counseling
- Personal Emergency Response



Physical Disability Eligibility Requirements

- Age 18 through 64
- Have a physical disability as determined by Disability Determination Services and not eligible for Intellectual Disability Waiver
- Level of Care
 - Nursing Facility
 - Skilled Nursing Facility
 - Intermediate Care Facility/Intellectual Disability



Physical Disability Waiver Allowable Services

- Home and Vehicle Modification
- Transportation
- Personal Emergency Response
- CDAC

Specialized Medical Equipment



Children's Mental Health Eligibility Requirements

- Under age 18
- A serious emotional disturbance diagnosis
- Level of Care
 - > Psychiatric Hospital serving children under the age of 21



Children's Mental Health Waiver Allowable Services Environmental Modification, Assistive **Devices and Therapeutic Resources** Family and Community Support Services In-Home Family Therapy

Respite



Elderly Waiver Eligibility Requirements

- ✤ Age 65 and older
- Level of Care
 - > Nursing Facility
 - > Skilled Nursing Facility



Elderly Waiver Allowable Services

- Adult Day Care
- Assistive Devices
- Assisted Living On-Call
- Case Management
- Chore
- CDAC
- Home and Vehicle
 Modification
- Home Delivered Meals
- Home Health Aide

- Homemaker
- Mental Health Outreach
- Nursing
- Nutritional Counseling
- Personal Emergency Response
- Respite
- Senior Companion
- Transportation



Intellectual Disability Eligibility Requirements

- No age restriction
- Primary diagnosis of intellectual disability as determined by a psychologist or psychiatrist
- Level of Care
 - Intermediate Care Facility/Intellectual Disability



Intellectual Disability Waiver Allowable Services

- Adult Daycare
- CDAC
- Day Habilitation
- Home and Vehicle Modification
- Home Health Aide
- Interim Medical Monitoring and Treatment
- Nursing
- Transportation

- Personal Emergency Response
- Prevocational Services
- ✤ Respite
- Supported Community Living
- Residential-Based Supported Community Living
- Supported Employment



AIDS/HIV Waiver Eligibility Requirements

- No age restriction
- AIDS/HIV diagnosis by a physician
- Level of Care
 - Nursing Facility
 - Hospital
 - Skilled Nursing Facility



AIDS/HIV Waiver Allowable Services

- Respite Care
- Home delivered meals
- Counseling Services
- Home Health Aide

- Nursing Care
- Adult Day Care
- CDAC
- Homemaker



Brain Injury Waiver Eligibility Requirements

- No age restriction (effective July 1, 2014)
- Brain Injury diagnosis as defined in Iowa Administrative
 Code (IAC) Chapter 83
- Level of Care
 - > Nursing Facility
 - Skilled Nursing Facility
 - Intermediate Care Facility/Intellectual Disability



Brain Injury Waiver Allowable Services

- Adult Daycare
- Behavioral Programming
- Case Management
- CDAC
- Family Counseling and Training
- Home and Vehicle
 Modification
- Interim Medical Monitoring and Treatment

- Personal Emergency Response
- Prevocational Services
- Respite
- Specialized Medical Equipment
- Supported Community Living
- Supported Employment
- Transportation



HABILITATION SERVICES



Habilitation Member Eligibility Requirements

The individual needs assistance demonstrated by meeting at least two of the following criteria on a continuing or intermittent basis for at least twelve months:

- Assistance to obtain and/or maintain employment
- Financial assistance to reside independently in the community.
- Significant assistance to establish or maintain a personal social support system
- Assistance with at least one activities of daily living (ADLs) or instrumental activities of daily living (IADLs) to reside independently in the community
- Assistance with management and intervention of maladaptive or antisocial behaviors to ensure the safety of the individual and/or others



HCBS Habilitation Eligibility Requirements

- AND The individual meets at least <u>one</u> of the following **risk** factors:
- A history of inpatient, partial hospitalization, or emergency psychiatric treatment more than once in the individual's life; or
- A history of continuous professional psychiatric supportive care other than hospitalization; or
- A history of involvement with the criminal justice system; or
- Services available in the individual's community have not been able to meet the individual's needs; or
- A history of unemployment or employment in a sheltered setting or poor work history; or
- A history of homelessness or is at risk of homelessness



HCBS Habilitation Member Eligibility Requirements (continued)

The countable *income* used in determining the member's Medicaid eligibility does not exceed 150 percent of the federal poverty level

The member's case manager or integrated health home care coordinator has completed a <u>needs assessment</u> of the member's need for service and the Iowa Medicaid Quality Improvement Organization (QIO) Unit or the member's MCO has determined that the member is in need of HCBS habilitation services



Habilitation Allowable Services

- Case Management
- Home-Based Habilitation
- Day Habilitation
- Prevocational Services
 - Prevocational Career Exploration
- Supported Employment
- Resources: <u>https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/habilitation</u>
- Frequently Asked Questions
- HCBS Habilitation Information Packet



The Case Manager's and IHH's Role

- Knowledge of HCBS program requirements, rules & regulations
- Develop the service plan based on personal goals and assessed needs
- Facilitate timely access to services
- Facilitate changes to the PCSP with the IDT as needed.
- Communicate with all service providers
- Facilitate access to Medicaid and Non-Medicaid services.
- Advocate for the member ensuring the appropriate amount of services are authorized, not too much and not too little
- Promote good stewardship and appropriate use of public funds
- Monitor service utilization and coordination



Additional Information

HCBS Provider need to enroll separately as a Habilitation Services provider because some qualifications may be different than for other programs a provider is currently enrolled for.

There is no age restriction on the receipt of Habilitation Services; anyone who meets all eligibility requirements for the program can receive the service.

As of January 1, 2011, there are no slots or waiting lists for the program.

As of June 1, 2008 there is no rule that prohibits a person from receiving Habilitation Services and Waiver services. A person must still meet all eligibility criteria for both programs, and services may not be duplicative between the two programs.

Anyone seeking services through this program must be eligible for Medicaid and have a need for such services which will be demonstrated by meeting the needs-based criteria.



Additional Contacts and Links

Visit HCBS home:

http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs

Iowa Medicaid Enterprises: <u>http://dhs.iowa.gov/ime/</u>

 Department of Human Services: <u>http://dhs.iowa.gov/</u>

 HCBS Waiver Email: <u>HCBSwaivers@dhs.state.ia.us</u>

HCBS Specialist by region or county at: <u>https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/hcbs-contacts</u>

