



Home and Community Based Services (HCBS) 101

Supporting Individuals In Their Homes And Community

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What are Home and Community Based Services (HCBS) Waivers ?

Waive traditional Medicaid guidelines to allow non-traditional Medicaid funded services in the home and community

Supports individualized services

Draw down federal \$'s to fund needed services

Serve adults and children, based on the specific waiver eligibility criteria

Who Qualifies for an HCBS Waiver?

Children and Adults

Meet the Financial Eligibility for the Waivers

- income at or below 300% of the Federal Poverty Level

Meet the Clinical Eligibility for the Waiver

- Diagnosis of AIDS/HIV
- Brain injury diagnosis as set forth in rule 441—83.81(249A)
- Age 18 and under with a diagnosis of serious emotional disturbance (SED)
- Age 65 or over
- Blind or disabled
- SSI-related coverage groups
- Primary disability of intellectual disability determined by a psychologist or psychiatrist
- Physical disability as determined by Disability Determination Services

Meet the Level of Care (LOC) for the specific waiver.

- Were it not for the waiver the member would require services in an institution – NF, SNF, ICF/ID, PMIC or Hospital

Waivers are not:

- Academic education
- Replacement of parental responsibility
- Cadillac service
- The only funding source. Medicaid is the last resort.



How to Apply

To apply for Health Care, go to the [online HHS benefits portal](#) or download the paper [Application for Health Coverage and Help Paying Costs](#)



[Flow Chart for Enrollment Process for New HCBS Waiver Members \(FFS and MCO\)](#)

Iowa's 1915(c) HCBS Waiver Programs

AIDS/HIV

Children's Mental Health

Brain Injury

Elderly Waiver

Health and Disability

Intellectual Disability

Physical Disability Waiver

What do the HCBS Waiver Programs have in common?

Availability- Statewide – first come first serve

Target Population – age- diagnosis - disability

Level of Care - SNF, NF, ICF/ID, PMIC

Maximum \$ per Month and/ or per Service

Services must be cost effective

Interdisciplinary Team (IDT) led by the member

Person Centered Service Plan coordinated and monitored by a Case Manager, Targeted Case Manager, Community-based Case Manager or Integrated Health Home (IHH)

HCBS Roles



Income Maintenance Worker (IMW) – reviews the application and determines financial eligibility



Case Manager(CM)/Integrated Health Home (IHH) – reviews need for services, coordinates the service plan with the interdisciplinary team, seeks funding authorization and monitors comprehensive service plan implementation,



Iowa Medicaid Medical Services – reviews level of care based on a functional assessment tool and accompanying information



Funder – Iowa Medicaid allocates a funding slot and approves individual services and costs via an IoWANS milestone



Providers – agencies or persons enrolled/certified to provide HCBS services

Role of the Targeted Case Manager (TCM), Community Based Case Manager (CBCM) and Integrated Health Home (IHH)

- ▶ HCBS BI and ID Waiver services are coordinated and monitored by a TCM or MCO CBCM
- ▶ HCBS CMH Waiver and HCBS Habilitation services are coordinated and monitored by an Integrated Health Home (IHH) Team.
- ▶ HCBS Health and Disability Waiver services are coordinated and monitored by an HHS TCM or MCO CBCM

Role of the Targeted Case Manager (TCM), Community Based Case Manager (CBCM) and Integrated Health Home (IHH) Care Coordinator

- Help individuals meet their needs, promote their independence, and self-determination
- Act as an advocate
- Facilitate the individual's access to the service system
- Facilitate access to health and mental health care
- Coordinate the delivery of services and develop the person-centered service plan
- Promote ongoing communication
- Monitor service utilization
- Monitor the service plan to ensure that services are being received and that the services are meeting the individual's needs

Role of Managed Care Organizations (MCO)s in HCBS Service Authorization

- Complete the initial level of care assessment and annual reassessment
- Review and approve the Person-Centered Service Plan (PCSP)
- Authorize HCBS Services
- Monitor the delivery of HCBS
 - Quality
 - Effectiveness
- Manage waiver costs
- Provide oversight to the HCBS providers

1915(C) HCBS Waiver Funding Slots

Each HCBS Waiver has:

- ▶ A set number of CMS approved funding slots per waiver year
- ▶ A set number of CMS approved unduplicated members that may be served at any **point in time** during the waiver year
- ▶ HHS, Iowa Medicaid Budget Analysts set the budget that determines how many funding slots may be funded at any **point in time** during the waiver year
- ▶ HHS, Iowa Medicaid Budget for the HCBS Waiver determines how many people are on the HCBS Waiver waitlist at any given time

1915(C) HCBS Waiver Waitlists

All HCBS Waivers have a waitlist except for the AIDS/HIV Waiver and the Elderly Waiver.

- ▶ Funding slots are allocated on a first come first served basis based on date of application as slots become available for release
- ▶ Waitlists are established when the state has reached the approved cap on the unduplicated number of funding slots or point in time funding slots approved for the waiver
- ▶ Exceptions
 - Emergency Needs Assessment BI Waiver
 - Priority Needs Assessment ID Waiver
 - Reserved Capacity Slots – BI, CMH and ID Waivers

BI Waiver Emergency Needs Assessment

Letter is sent to BI applicant at the time of application

If member has emergent or urgent needs they complete and submit form 470-5583 Brain Injury Waiver Emergency Need Assessment

Applicants who meet the urgent need criteria will have their names moved up the waitlist after those who meet the emergency need criteria. The position on the waiting list shall be based on the total number of criteria that are met.

Applicants who do not meet emergency or urgent need criteria shall remain on the waiting list, based on the date of application

ID Waiver Priority Needs Assessment

Letter is sent to ID applicant at the time of application

If member has emergent or urgent needs, they complete and submit form [470-5110 HCBS ID Waiver Priority Needs Assessment- Statewide Waiting List](#)

Applicants who meet any of the emergency criteria shall be placed on the statewide wait list based on total number of criteria met.

Applicants who meet any of the urgent needs criteria are placed on the waiting list after those with emergency needs based on the number of criteria met.

Applicants who do not meet emergency or urgent need criteria shall remain on the waiting list, based on the date of application.

CMH Waiver Priority Needs Assessment

Letter is sent to CMHW applicant at the time of application

If member has emergent or urgent needs, they complete and submit form [470-5795 HCBS Waiver Priority Needs Assessment \(WPNA\)](#)

Applicants who meet any of the emergency criteria shall be placed on the statewide wait list based on total number of criteria met.

Applicants who meet any of the urgent needs criteria are placed on the waiting list after those with emergency needs based on the number of criteria met.

Applicants who do not meet emergency or urgent need criteria shall remain on the waiting list, based on the date of application.

Reserved Capacity Slots

Slots are reserved during each waiver year to enable institutionalized members to transition to HCBS

ID Waiver

For members residing in an ICF/ID

- 125 slots Waiver year July 1 – June 30

For minors seeking Residential Based Supported Community Living (RBSCL)

- 75 slots Waiver year July 1- June 30

BI Waiver

For members residing in an ICF/ID, NF, SNF

- 30 slots Waiver year October 1 – September 30

For members receiving community-based neurobehavioral rehabilitation services (CNRS)

- 15 slots Waiver year October 1 – September 30

Reserved Capacity Slots

Slots are reserved during each waiver year to enable institutionalized members to transition to HCBS

CMH Waiver

30 slots Waiver year October 1 – September 30

For children receiving inpatient services in one of the following:

- ▶ Psychiatric Medical Institutions for Children (PMIC),
- ▶ Mental Health Institute (MHI)
- ▶ Qualified Residential Treatment Program (QRTP)
- ▶ Out of State - Psychiatric Residential Treatment Facilities (PRTF)

AIDS/HIV Waiver

Age	No Limit
Availability	Statewide
Target Population	Diagnosis of AIDS/HIV
Level of Care	<ul style="list-style-type: none">• Hospital
Maximum \$ per Month	\$2,026.03.

AIDS/HIV Waiver Services

- Counseling,
- Home Health Aide
- Homemaker
- Nursing care
- Respite care
- Home-delivered meals
- Adult day care
- Consumer-Directed Attendant Care
- Consumer Choices Option (CCO)

Brain Injury Waiver

Age	No Limit
Availability	Statewide
Target Population	Diagnosis of Specific BI, according to IAC
Level of Care	<ul style="list-style-type: none">• ICF/ID• NF• SNF
Maximum \$ per Month	Must be Cost Effective

BI Waiver Services

- ▶ Adult Daycare
- ▶ Behavioral Programming
- ▶ Case Management
- ▶ Consumer Directed Attendant Care
- ▶ Family Counseling and Training
- ▶ Home and Vehicle Modification
- ▶ Interim Medical Monitoring and Treatment
- ▶ Personal Emergency Response
- ▶ Pre-vocational Services/ Career Exploration
- ▶ Respite
- ▶ Specialized Medical Equipment
- ▶ Supported Community Living
- ▶ Supported Employment
- ▶ Transportation

Children's Mental Health Waiver

Age	Up to age 18
Availability	Statewide
Target Population	Diagnosis of Serious Emotional Disturbance resulting in functional limitation
Level of Care	<ul style="list-style-type: none">• Psychiatric Medical Institution for Children (PMIC)
Maximum \$ per Month	\$2,165.87

Children's Mental Health Waiver Services

- ▶ Environmental modifications, adaptive devices and therapeutic resources
- ▶ Family and community support services;
- ▶ In-home family therapy
- ▶ Respite care.

Elderly Waiver

Age	Over 65
Availability	Statewide
Target Population	Age 65 and Over
Level of Care	<ul style="list-style-type: none">• NF• SNF
Maximum \$ per Month	Must be Cost Effective

Elderly Waiver Services

- Adult Day Care
- Assistive Devices
- Assisted Living
- Case Management
- Chore
- Consumer Directed Attendant Care (CDAC)
- Emergency Response
- Home Delivered Meals
- Home Health Aide
- Homemaker
- Home and Vehicle Modifications
- Mental Health Outreach
- Nursing
- Nutritional Counseling
- Respite
- Senior Companion
- Transportation

Health and Disability Waiver

Age	Under age 65
Availability	Statewide
Target Population	<ul style="list-style-type: none">• Blind/Disabled – SSI/SSDI or DD• If over 21, ineligible for SSI – SSDI is OK
Level of Care	<ul style="list-style-type: none">• ICF/ID• SNF• NF
Maximum \$ per Month	SNF: \$3,014.69 NF: \$1,035.79 ICF/ID: \$4,040.52

Health and Disability Waiver Services

- Adult Day Care
- Homemaker
- Home health
- Respite care
- Nursing
- Counseling
- Consumer-Directed Attendant Care (CDAC)
- Interim medical monitoring and treatment (IMMT)
- Home and vehicle modification
- Personal emergency response system
- Home-delivered meals
- Nutritional counseling
- Consumer Choices Option (CCO)

Intellectual Disability (ID) Waiver

Age	No Limit
Availability	Statewide
Target Population	Diagnosis of ID/Functioning in range of ID
Level of Care	ICF/ID
Maximum \$ per Month	Cost Effective

ID Waiver Services

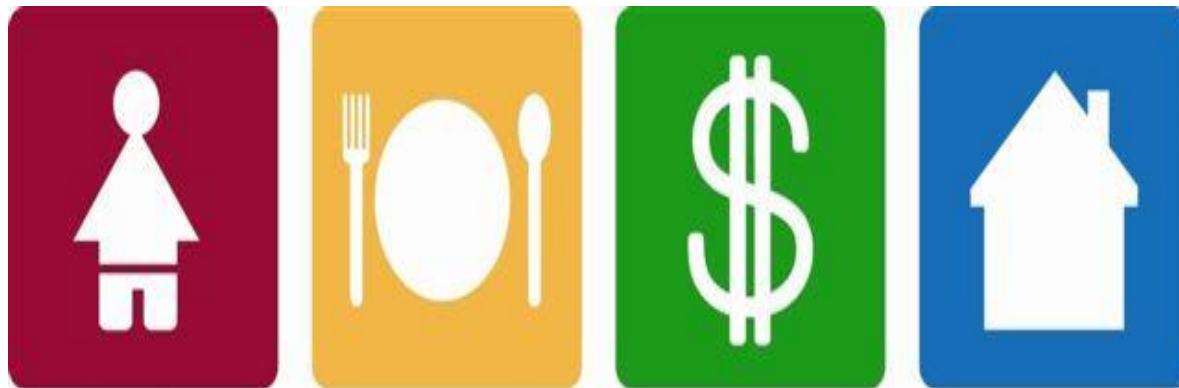
- Adult Daycare
- Consumer Directed Attendant Care
- Day Habilitation
- Home & Vehicle Modification
- Home Health Aide
- Interim Medical Monitoring and Treatment
- Nursing
- Personal Emergency Response
- Pre-vocational and Career Exploration
- Respite
- Supported Community Living
- Residential-Based Supported Community Living
- Supported Employment
- Transportation

Physical Disability Waiver

Age	18 to 64
Availability	Statewide
Target Population	Diagnosis of Physical Disability/not eligible for ID Waiver
Level of Care	NF
Maximum \$ per Month	\$761.95

Physical Disability Waiver Services

- Consumer-Directed Attendant Care
- Home and Vehicle Modification
- Personal Emergency Response System
- Transportation
- Specialized Medical Equipment
- Consumer Choices Option



CONSUMER CHOICES OPTION

Which HCBS Waivers have the CCO?

- Intellectual Disability
- Brain Injury
- Health and Disability
- Elderly
- AIDS/HIV
- Physical Disability



What is different about CCO?

- ▶ Members can directly hire employees to provide services- Service providers do not need to be a certified/enrolled Medicaid provider
- ▶ Members can use their Medicaid HCBS Waiver \$'s to purchase goods/services
 - example: hire a co-worker to be their job coach
 - example: hire a neighbor to provide transportation
 - example: purchase a microwave to assist with independence in meal preparation
- ▶ Financial Management Service provider to help manage the individual budget
- ▶ Additional counseling and advice through an Independent Support Broker

What remains the same with CCO?

- ▶ All members will have a person-centered service plan based on assessed needs
- ▶ Skilled services such as such as Nursing, Counseling, Home Health Aide, etc. will continue to be provided by Medicaid providers
- ▶ Case Management (CM, CBCM or TCM) will continue to monitor services

CCO Service Options

- ▶ Self-directed Personal Care- cleaning, meal preparation, showering assistance, respite
- ▶ Self-directed Community and Employment Supports- social skills development, career placement, cooking skills development
- ▶ Individual Directed Goods and Services- HVM, snow removal, lawn care services, home delivered meals

State Plan: HCBS Habilitation General Guidelines

- ▶ The program is similar to HCBS waiver programs:
 - Assessment to determine need for services
 - A team led by the member assisted by Case Manager(CM) or Integrated Health Home (IHH) plans for the services
 - The team develops the service plan during the service planning meeting
 - The CM or IHH writes the service plan
 - Iowa Medicaid or member's MCO approves the service plan

State Plan: HCBS Habilitation Eligibility

- ▶ Must be eligible for Medicaid through an existing coverage group
- ▶ Household income cannot exceed 150% of Federal Poverty Level (FPL)
- ▶ Meet needs-based and risk-based eligibility criteria as determined by a Needs-Based Assessment

State Plan: HCBS Habilitation Services

- Case Management
- Day Habilitation
- Home-Based Habilitation
- Prevocational Services
 - Career Exploration
- Supported Employment
 - Individual Supported Employment
 - Long-Term Job Coaching
 - Small Group Supported Employment
 - Individual Placement and Support (IPS)
Supported Employment (SE)

HCBS Online Resources

Department of Health and Human Services: <https://hhs.iowa.gov/>

HHS, Iowa Medicaid: <https://hhs.iowa.gov/ime/about>

Iowa Medicaid Member Information: <https://hhs.iowa.gov/ime/members>

Iowa Medicaid Provider Information: <https://hhs.iowa.gov/ime/providers>

Iowa Medicaid HCBS Home: <https://hhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs>

HHS, Iowa Medicaid Rules and Policies:
<https://hhs.iowa.gov/ime/providers/rulesandpolicies>

Iowa COMPASS Disability Resource Database: <http://search.iowacompass.org/>

HCBS Rules , Provider Manual and Informational Letters

▶ <https://hhs.iowa.gov/ime/providers/rulesandpolicies>

HCBS Waiver Provider Manual

▶ <https://hhs.iowa.gov/sites/default/files/HCBS.pdf>

HCBS Policy Program Managers

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Questions