Workforce and Talent Management

Training Curriculum Series

Home and Community Based Services Waiver (HCBS)

Participant's Manual

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Medicaid Service Coordination Specialty Module Training

Home and Community Based Waiver

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HCBS Waiver Topic Outline

- OPWDD Vision, Mission and Guiding Principles
- The Individualized Service Environment (ISE)
- Purpose of the HCBS Waiver
- History and Background
- Providers of Waiver Services
- Individual Eligibility
- Waiver Services
- Access to Waiver Enrollment
- Aspects of the HCBS Waiver
- Self Advocacy or Choice of Advocate
- Role and Responsibilities of the Service Coordinator regarding the HCBS Waiver

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OPWDD

- Vision Statement
- Mission Statement
- Values and Guiding Principles

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The Individualized Service Environment (ISE)

- An unbundled network of separate and distinct supports and services which are not linked to other programs or services.
- The waiver supports the ISE by providing a choice of distinct services rather than a package of services.
- It is a person first and person centered approach that requires that supports and services be built around the person with disabilities.

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The ISE is characterized by:

- Person Centered Planning: a way to develop a personal plan
- Personal Choices
- Self-Direction and Control
- Active Advocacy
- Providers of Choice
- Supports and Services Provided at Home, at Work, and in the Community
- Choice of a variety of service options, including Natural and Community Supports
- Individual Satisfaction

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The Purpose of the HCBS Waiver

- To use innovative service alternatives not normally provided through more traditional programs. These distinct and individualized services help people to remain at home and in the community.
- It is OPWDD's primary funding mechanism for supporting the ISE.
- Waiver funding is 50% Medicaid Federal dollars and 50% State dollars.

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History and Background

- In 1981, Congress passed legislation that allowed Medicaid to fund community services for people with long-term care needs. This was an alternative to receiving long-term care services in an institution (skilled nursing facilities, developmental centers, and long-term care hospitals).
- This legislation was Section 1915c of the Social Security Act.
- People enrolled in the waiver must meet ICF/MR Level of Care.

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History and Background (continued)

- NYS obtained the HCBS Waiver on 8/29/91.
- It was the 48th state to obtain the HCBS Waiver.
- NYS is currently one of the largest providers of waiver services in the country.
- OPWDD's most recently renewed HCBS Waiver went into effect on 10/1/2009.

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History and Background (continued)

- NYS has other types of waivers that serve long-term care populations. They are:
  - Care at Home Waivers
    - OPWDD and the Department of Health
  - Traumatic Brain Injury Waiver
    - Department of Health
  - HCBS Waiver for Children and Adolescents with Serious Emotional Disturbances
    - Department of Mental Health

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History and Background (continued)

The waiver "waives" certain Medicaid rules in the Social Security Act so that states can creatively use Medicaid long-term care dollars to support people in the community (ISE).

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History and Background (continued)

- Two rules of the SSA are "waived" in NYS:
  1. **Comparability:**
     - Medicaid services must be offered on a comparable basis to all Medicaid-eligible persons in the state and available to all Medicaid recipients who need it. When this rule is waived, separate and distinct Medicaid services can be provided to a separate and pre-defined group.
  2. **Parental Income:**
     - Parent's income and assets are counted for the child's Medicaid eligibility determination. When this rule is waived, only the child's income and assets are counted.

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Individual Eligibility

To receive a waiver service a person must be enrolled in the waiver.

1. Developmental Disability
2. Eligibility for ICF/MR Level of Care
3. Enrolled in Medicaid
4. Choose HCBS Waiver participation rather than ICF/MR
5. Live in either:
   - Own home
   - Family Care Home
   - Individualized Residential Alternative (IRA)
   - Community Residence (CR)
   - Supervised or Supported Apartments

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Termination Conditions

The service coordinator is responsible for initiating the process of terminating the enrollment of the person in the waiver by notifying the DDSO when any of the following occurs:

- The person chooses not to receive waiver services any longer.
- The person is no longer eligible for Medicaid.
- The person is permanently admitted to an ICF, developmental center, or other long-term care Medicaid funded facility.

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Providers of Waiver Services

- Providers must be an incorporated not-for-profit agency or the DDSO.
- A voluntary agency provider has a Waiver Provider Agreement with the NYS Department of Health.
- Memorandum of Understanding between OPWDD and DOH.
- All providers must comply with NYS Regulations:
  - Part 635: General Quality Control and Administrative Requirements
  - Part 6:33: Protection of Individuals receiving Services
  - Part 624: Reportable Incidents, Serious Reportable Incidents and Abuse.

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Waiver Services

1. Habilitation
   - Residential
   - Day
   - Prevocational
   - Supported Employment
2. Respite
3. Adaptive Devices
4. Environmental Modifications
5. Plan of Care Support Services
6. Family Education and Training
7. Consolidated Supports and Services
8. Financial Management (FMS) Services
9. Transitional Supports
10. Intensive Behavioral Services
11. Community Habilitation

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Waiver Services

The service coordinator must ensure that each person enrolled in the waiver receives at least one waiver service in a 12-month period.

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Waiver Habilitation Services

Have a common Purpose or Focus:

- Successful community living at home and away from home
- The pursuit of the person's specific requests or valued outcomes

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Habilitation: RH, DH, CH

- Residential Habilitation
  - Provided primarily in the person's home and in the community. When the service is provided in the community, it occurs at a time that is usually considered part of the person's "non-working" hours.
- Day Habilitation
  - Provided primarily away from a person's home in a certified community setting. However, day hab services can not occur at the same time as residential habilitation or any other habilitation service.
- Community Habilitation
  - Provided in a non-certified community setting, including a person's home.

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Habilitation (RH, DH, CH)

- The scope is:
  - Skill acquisition (what will the person be taught to do?)
  - Support (what will staff do for the person?)
  - Exploring new experiences
  - Certain clinical services
  - Protective oversight/safeguards for health and safety
  - Transportation associated with certain service delivery

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Habilitation (RH, DH, CH)

- Habilitation plans are required and are completed AFTER collaborative personal planning has begun and the person's valued outcomes have been identified.
- As with all habilitation, RH, DH, and CH staff plan collaboratively with the person, service coordinator, and others and the service must be provided according to a habilitation plan.
- Collaborative planning is facilitated by the service coordinator.

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Prevocational Services

- The purpose is to teach proper job habits needed in work settings but not how to do the job itself.
- The scope includes:
  - Skill acquisition (what will the person be taught to do?)
  - Support (what will staff do for the person?)
  - Exploring new experiences
  - Protective oversight/safeguards for health and safety

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Prevocational Services

Examples of the scope of prevocational services are:

- Teaching proper job habits
- Problem solving
- Using public transportation
- Following directions
- Consistent daily attendance

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Prevocational Services

- The person must demonstrate an earning capacity of less than 50% of the federal minimum wage or prevailing wage
- As with all habilitation, prevocational staff plan collaboratively with the person, service coordinator, and others and the service must be provided according to a prevocational plan.
- Prevocational services usually occur in sheltered workshops or in the community.

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Supported Employment

- Services assist people in finding and keeping employment that the person finds meaningful.
- The scope is the same as those for prevocational services:
  - Skill acquisition (what will the person be taught to do?)
  - Support (what will staff do for the person?)
  - Exploring new experiences
  - Protective oversight/safeguards for health and safety

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Supported Employment

- Examples of the scope of supported employment services are:
  - Job coaching and supervision
  - Mobility and transportation training
  - Teaching work skills
  - Assessment of the person's skills
  - Socially appropriate behaviors

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Supported Employment

- Takes place in integrated work settings which provide regular interactions with people who do not have disabilities and who are not paid to provide services to people with a developmental disability.
- As with all habilitation, supported employment staff plan collaboratively with the person, service coordinator, and others and the service must be provided according to a supported employment plan.

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Respite

- A service that provides short-term relief to caregivers who are responsible for the primary care and support of individuals.
- Services are provided by the hour.
- Can occur in a person's home or in an approved site, such as a free-standing respite center.
- Can be provided in existing IRA temporary use beds with the consent of people residing in the IRA.
- May be provided by either a RN or LPN because of medical or health concerns.

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Adaptive Devices

- Are aids, controls, appliances, or supplies of either a communication or adaptive type which are necessary to enable the person to increase or maintain his or her ability to live at home and in the community with independence and safety.
- Assist the person in the performance of self-care, work , personal growth, and or physical exercise.
- Those devices covered by State Plan Medicaid under durable medical equipment must be accessed first before requesting waiver funding.

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Environmental Modifications

- Are adaptations to the home that are necessary to increase or maintain a person's ability to live at home with independence.
- They address needs related to physical, behavioral, or sensory disabilities, and help ensure that a person's health, safety, and welfare needs are met.
- Modifications covered by State Plan Medicaid must be accessed first before requesting waiver funding.

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Plan of Care Support Services

- Provided to people who are enrolled in the HCBS Waiver and do not have MSC. It provides two essential services, usually performed by a service coordinator that maintain the person's waiver enrollment. These services are:
  - Review and update of the Individualized Service Plan at least every 6 months
  - Completion of the annual ICF/MR Level of Care Eligibility Determination Form

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- Plan of Care Support Services is not service coordination. It is a limited, task specific service.
- If the individual needs the assistance of a service coordinator to develop, implement or actively maintain the ISP, PCSS refers the person to the DDSO for re-enrollment in MSC.

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Family Education and Training

- FET provides education and training to caregivers of children under the age of 18 who are enrolled in the HCBS Waiver.
- The purpose is to enhance the family's knowledge, skills, and decision making capacity to help them care for a child with developmental disabilities.
- A broad array of topics can be provided based on the needs and wishes of the caregivers.
- FET can be provided to one family or in groups of no more than eight families.

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Consolidated Supports and Services (CSS)

- The funding source for certain costs for people enrolled in self-determination.
- People have increased authority to control resources.
- Supports and services are beyond being person-centered; they are self-directed.
- It is provided according to a CSS plan.

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Fiscal Management Service (FMS)

- Provides the support and services to assist people who are managing their own service funds, for example, CSS.
- The service involves an OPWDD approved not-for-profit agency performing the following services as authorized in a plan/budget:
  - Billing
  - Payment
  - Reporting
  - Selected employment-related services

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Intensive Behavioral Services

- This service is intended to address the critical need for intensive behavioral supports in the home for individuals at risk of placement in a more restrictive residential setting.

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New Services in the Waiver

- 12. Pathways to Employment
  - Exploring the work world and seeking jobs for recent HS graduates and Day Hab participants.
- 13. Community Transition
  - Start up household costs for people moving from institution and form provider operated settings (e.g. IRAs) into a non-certified living arrangement.
- 14. Self-directed Options (a) Support Brokerage and (b) Fiscal Management Services

  (a): Support Brokerage: specialized supports, such as hands-on help finding house or apartment.

  (b): Fiscal Management Services: agency with choice. Single agency involves person in decisions about staffing, types of services and management of budget.

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Access to Waiver Enrollment

- The service coordinator helps the person to apply for the HCBS Waiver and maintains copies of all enrollment forms in the person's service coordination record.
- The service coordinator first contacts OPWDD to request services funded by OPWDD.
- The appropriate DDSO or the Regional Office reviews requests.

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If the request for services funded by OPWDD results in a referral to the HCBS Waiver, the following basic steps are taken:

- Completion of the HCBS application packet
- Packet is forwarded to the DDSO (regional office of OPWDD)
- DDSO reviews Preliminary Individualized Service Plan
- DDSO assesses priorities and availability of funding
- DDSO documents individual's choice of HCBS services
- DDSO issues a Notice of Decision (NOD) to the person with disabilities.

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Aspects of the HCBS Waiver

1. Budget Neutrality
   - On average, the cost of furnishing home and community based services may not exceed the cost of the institutional services which otherwise would be required by the individuals to be served.
2. Opportunities for Enrollment
   - Any state can only serve the maximum number of people approved by the Centers for Medicare and Medicaid (CMS).

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Aspects of the HCBS Waiver

3. Renewals and Surveys by the Centers for Medicare and Medicaid (CMS)
   - The HCBS Waiver is renewed by CMS after the first three years of the waiver and every five years thereafter.

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Aspects of the HCBS Waiver

4. Basic Assurances

In order for CMS to approve a state's home and community based waiver (first approval or renewal), the state must make certain written "assurances". These are reviewed in every survey and include:

- The health and safety of individuals are protected.
- Services are provided according to a plan of care.
- The waiver is cost effective (budget neutrality).
- Individuals have freedom of choice to choose waiver services or an ICF/MR, and service providers.
- Waiver services are furnished only to individuals who would otherwise qualify for ICF/MR Level of Care.

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Self-Advocacy or Choice of Advocate

- Everyone enrolled in the HCBS Waiver must have an active advocate unless the person is self-advocating.
- An advocate helps the person look out for his/her own interests.
- The service coordinator has the responsibility to find an advocate if the person is not self-advocating.

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The Individualized Service Plan (ISP)

- The ISP is a blueprint which identifies what a person wants and needs, appropriate services, and service providers.
- It is written by the service coordinator.
- All people enrolled in the waiver must have a current ISP.
- Any waiver services delivered to the person must be specified in the ISP.
- Habilitation plans are attached to the ISP.
- The ISP is reviewed, through collaborative planning, at least twice a year.

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Role and Responsibilities of the Service Coordinator Regarding the HCBS Waiver

1. Assist the person with enrollment in the Waiver.
2. Develop, implement, and maintain the person's ISP. This must involve collaborative planning with the person, advocate/family, and those assisting the person or providing services. The ISP includes what a person needs and wants.
3. Protect the individual's health and safety.
4. Promote informed choice, community inclusion, satisfaction with planning and services, and the Individualized Service Environment.

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Role and Responsibilities of the Service Coordinator Regarding the HCBS Waiver

5. Review the ISP at least twice every year.
6. Keep the ISP current and distribute copies with all attachments: res hab plan, day hab plan, waiver prevoc plan, waiver supported employment plan, individual plan for protective oversight (if the individual lives in an IRA), and the service coordination activity plan.

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Role and Responsibilities of the Service Coordinator Regarding the HCBS Waiver

7. Assist with access to waiver services.
8. Ensure the completion of an annual redetermination of the need for the Level of Care in an ICF/MR.
9. Secure or continue to secure an advocate for each enrolled person who requires or chooses to have one.
10. Notify the DDSO immediately when the person should be terminated from the waiver.
11. Maintain the person's service coordination record including waiver enrollment documentation.
12. Ensure that every individual receives at least one waiver service in a 12-month period.

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Further information about the HCBS Waiver

- The Key to Individualized Services (available at your agency)
- OPWDD Web Site: www.opwdd.ny.gov

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