



What is a waiver?

In 1981, the Social Security Act established the Home and Community Based Services Waiver. This action allowed individuals to receive services funded by Medicaid that were not necessarily provided in a licensed and regulated environment (state hospital, nursing home, etc) - the condition that services must be received in a regulated facility is "waived." In other words, dollars were allowed to fund community services based on the needs of the individual, rather than only funding beds in M.A. certified facilities. The dollars were committed to individual clients, and could follow the client.

Waivered Services can provide many opportunities and alternatives for people with disabilities. Under the licensed and regulated setting, it was actually the building and program that were licensed, and a person moved into or out of a rigid and established setting which was based on license requirements rather than the need of the individual.

Under Waivered Services, the individual is able to choose from a myriad of services. Although (presently) the Department of Human Services must approve the services, this change represented a real and dynamic change in the focus of providing services. The focus changed from licensing and funding "beds," to funding individuals themselves.

What are the different types of waived services?

There are several types of waived services based on an individuals' disability. The following is a summary of each of the different services provided by the waiver.

Adult Day Care

Adult Day Care provides supervision, care, assistance, training and activities for individuals based on personal need. It is available to those 18 years of age or older, and encompasses both health and social services. Physical, occupational, and speech therapy may be provided in addition to the day care, which must be licensed by the Minnesota Department of Human Services.

Assisted Living Services

Assisted Living Service, defined as up to 24-hour supervision and oversight, provides individualized home-care tasks and home-management tasks to residents of a residential center, living in their own units/apartments. Apartments, or units, contain normal items for daily living,

including a stove, oven, refrigerator, and food preparation tools and space. The management of the residential center, or providers under contract with the management or local agency, provide assisted living services. Supportive services include socialization with specific goals and outcomes, assistance with setting up meeting and appointments, and transportation when provided by the residential center. Home-care services include support in areas of diet, medication compliance, exercise, and personal care and hygiene. Home-management tasks include housekeeping, laundry, preparation of snacks and meals, and shopping. Providers may be licensed under different Department of Health licenses depending on the services and living arrangements.

Assistive Technology

Assistive technology refers to the utilization of devices, equipment, and training which improve a recipient's ability to perform activities of daily living, control or access of his/her environment, or communication in his/her community. To be accessed, the item or technology must be specified as necessary to meeting a recipient's needs in the Individual Service Plan (ISP). All provisions of this service must meet recipient needs in activities of daily living and/or functional communication, and address the lack of control over one's environment that often results in challenging behaviors. The Service Planning Team is responsible for identifying the person(s) or entity qualified to provide the assistance.

Behavior Support

Behavior support provides individualized strategies to support a person whose behavior interferes with their success in the community. Many waivers include this program support as part of their established rate. On the other hand, other waivers, such as Traumatic Brain Injury, require professional standards and identified services, including assessment, behavior-plan development, and intervention. A provider under this waiver category must be a psychologist licensed in the state of Minnesota.

Caregiver Training and Education

This category provides training and education services to a parent or primary caregiver who is not employed by a corporation yet provides supervision and care to the recipient. Training must be provided by individuals, agencies, or educational facilities that have demonstrated expertise in appropriate topics. This component is frequently utilized to support Client-Directed Services. To be eligible for payment, the provider must be an enrolled Medicaid provider and submit claims for this service to MMIS. Claims are limited to \$2,500.00 per recipient, annually.

Case Management

Case Management services are required for all waived-services recipients. In some cases, the case manager is a public health nurse, registered nurse, or social worker employed by the local agency (county). If individuals not employed by the local agency provide services, then the provider of services is required to execute a contract with the agency in order to provide case

management. Current legislation requires a study be conducted by the Department of Human Services, in conjunction with other stakeholders, regarding cost and effectiveness of the current system, as well as considerations for alternative methods of service delivery.

Children's Supports

Although not inclusive, the following resources are available through other funding sources:

1. MA services through TEFRA (up to age 18)
2. Family Support Grant (up to age 22)
3. Minnesota Children with Special Health-Care Needs (up to age 21).

There are other services available for children under the Consumer-Directed Community Supports. Please see that section for more details.

Chore Services

Chore services are available only for cases where neither the person nor any others in the household or any other individual or party, is capable of performing or financially providing chore services. Services include those used to maintain the person's home as a clean, sanitary, and safe environment. Some service examples include heavy household chores such as washing floors or windows, shoveling snow, and the like.

Cognitive-Rehabilitation Therapy

Cognitive therapy is specifically designed to improve cognitive functions such as attention, concentration, and information-processing and other skills. This service is available only to people participating in the Traumatic Brain Injury Waiver.

Companion Services

Companion services consist of non-medical care provided to a functionally impaired adult. A companion may assist the person with tasks such as meal preparation, laundry and shopping, and may accompany the individual into the community. This service is available only to people participating in the Traumatic Brain Injury Waiver.

Consumer-Directed Community Supports

The CDCS program is a flexible service option allowing a client or his/her designee to direct individualized supports. Given an approved amount of money within a county's MR/RC waiver budget, the individual can direct services by choosing who performs the support services. Also, the individual directs the budget and designates the supports rendered.

The program's intent for people with disabilities is to provide the most cost effective services, to allow self-determination, to prevent institutional placement, and to reinforce peoples' current supportive relationships in their life.

Consumer Training and Education

Consumer training and education is a service designed to help a person with a disability develop his/her self advocacy skills, exercise his/her civil rights, and acquire skills that enable him/her to exercise control and responsibility over the supports they receive. Areas of training and education towards these outcomes must be documented in the person's individual-service or personal-support plan. Payment will not exceed \$2,500.00 per recipient, annually.

Crisis-Respite

Crisis-respite services are specialized services providing short-term care and intervention to an individual due to either the need for relief and support of the caregiver or protection of the recipient or others living with the recipient. Crisis and respite usage have specific activities and intervention strategies directed toward enabling the recipient to remain in the community. Crisis-respite services can either be provided to the recipient in his or her home or, when necessary, for the relief of the care giver and the protection of the recipient or others living in the home. The services are provided in a specialized, licensed foster-care facility developed for the purpose of providing short-term respite and crisis intervention. All local county agencies and providers of crisis services, who seek Medicaid home and community-based reimbursement for crisis-respite services, must have an annually approved provider agreement. This agreement is specific to the local agencies' responsibilities, provider responsibilities, the services to be provided, as well as the network of specialized -service providers to be utilized.

Provider Standards

Crisis-respite services will be provided by entities licensed under Minnesota Statutes, Chapter 245 B, residential habilitation, and, if out of home crisis intervention, will be provided in a location licensed under Minnesota, Parts 9545.0010-9545.0260 or Minnesota Rules, parts 9555.5105-9555.6265 (Child and Adult Foster Care licensing rules). The service planning team has the ability to require additional provider qualifications when determined necessary for the crisis-respite provider to appropriately meet individual recipient needs.

Family Counseling and Training

Family counseling and training include services for the person as well as the family with whom he/she lives or who routinely provide care. Family is defined to be the persons who live with or provide care to a client and may include spouse, children, friend's relatives, foster family, or in-laws. Family does not include individuals who are employed to care for the person. Training is for the purposes of increasing the person's or family member's capabilities to maintain and care for the person in the community. It includes use of equipment and treatment regimes as specified in the care plan.

Provider Standards

All vendors who provide training services must be Medicare certified and/or enrolled as an MA provider and be qualified in their field of service. Service Vendors may be Social Workers,

Physicians, Registered Nurses, Occupational Therapists, Respiratory Therapists, Medical Equipment Suppliers, Speech-language pathologists, Nutritionists, Mental Health Professionals, and more.

Foster-Care Services:

Adult Foster Care. Adult Foster Care is available to persons 18 years of age and older. This care service, for up to four functionally impaired adults, is defined as a licensed, adult-appropriate, sheltered living arrangement in a family-like environment.

Provider Standards for Adult Foster Care. Providers of adult foster care must be licensed under Minnesota Rules, parts 9555.5105 to 9555.6265.

Child Foster Care. Child Foster Care is available to CADI, TBIW, and CAC waiver recipients under the age of 18 years. Child foster care is defined as the provision of ongoing residential care and supportive services that enable the child to be cared for in a setting other than his/her natural family unit.

Provider Standards for Child Foster Care. Providers of family foster care are licensed under Minnesota Statutes section 245A.01 to 245A.1

Consumer Training and Education

Consumer training and education is a service designed to help a person with a disability develop his/her self advocacy skills, exercise his/her civil rights, and acquire skills that enable him/her to exercise control and responsibility over the supports he/she receives. Consumer training and education is provided by individuals, agencies or educational facilities who have expertise in areas such as consumer empowerment, consumer-directed community supports, self advocacy, community inclusions, relationship building, problem solving, and decision making.

Habilitation

Habilitation services are directed towards increasing and maintaining the physical, intellectual, emotional, and social functioning of persons with developmental disabilities or related conditions through the delivery of health and social services in order to avoid institutionalization.

Habilitation services will be provided either directly by, or under, the supervision of a qualified mental-retardation professional as defined in 2 CFR442.401. In addition to services provided by direct-care staff, supportive services for behavior management and medical and therapeutic services are be provided by professionals within the scope of their practice.

Residential Habilitation Services

Residential Habilitation Services are provided to individuals who cannot be maintained at home or who need outside support to remain in their home. In Minnesota, room and board payments

for adult Supported Living Services (SLS) recipients are made through a combination of county and Title IV-E funds. When there is more than one person benefiting from room and board at the same facility, the room and board costs are apportioned among all the beneficiaries to determine the payment amount for each recipient. Minnesota's home and community-based waiver will continue to pay for costs to modify or adapt a licensed facility or home where the waiver recipient resides to ensure the recipient's health and safety or to meet requirements of the applicable life-safety code.

In-Home Family Support Services

In-Home Family Support Services are habilitation services provided to persons with developmental disabilities or related conditions (and their families--including extended family members who are not providing licensed foster care), who are living in the family's home or in the community. This service enables the person to remain in, or return to, the home.

Supported Living Services for Children

This program involves the provision of habilitation services to children and adolescents with mental retardation or related conditions who require daily staff intervention due to severe behavior problems, medical conditions, physical deficits, and/or lack of adequate survival skills that can lead to the family's inability to maintain them in the home.

Supported Living Services for Adults

This program offers habilitation services to adults with developmental disabilities or related conditions who require daily staff intervention due to behavior problems, medical conditions, and/or lack of adequate survival skills. Daily staff intervention means direct care or professional staff providing a recipient on-site supervision, training, or assistance in the following areas: self-care, sensory/motor development, interpersonal skills, communication, reduction/elimination of maladaptive behavior, community living and mobility, health care, leisure and recreation, money management, and household chores. Services will be provided in a person's own place of residence, specialized adult foster homes, and group homes up to four persons, and, under restricted conditions specified by Minnesota Statute (section 252.28, subdivision 3, item 4), for up to six persons in the community.

Day Habilitation

Day habilitation services focus on the development and maintenance of life skills and community integration. These services are typically provided away from an individual's place of residence. The hours of service per day are based on the recipient's individual needs and functioning. This service is only offered as a waived service to individuals who are also receiving at least one residential service.

Home Delivered Meals

A home-delivered meal, served in the home of the waiver recipient, is an appropriate,

nutritionally balanced meal that meets one-third of the current daily Recommended Dietary Allowance (RDA).

Home-Health Services

Home-health services include care by home-health aides, registered nurses, and licensed practical nurses and therapists (occupational, physical, respiratory, and speech). A Home-Health Agency must be certified under Title XVIII (Medicare) of the Social Security Act to provide home-health services.

Homemaker Services

Homemaker services are residential services providing general household activities by a trained homemaker when the individual (a beneficiary, family member, or primary caregiver) regularly responsible for these activities is temporarily absent or unable to manage the home and care for him\herself or others in the home.

Independent Living Skills

Independent Living Skills (ILS) services are directed at the development and maintenance of a recipient's community living skills and community integration. Services may include supervision training or assistance with self-care, communication skills, socialization, sensory/motor development, reduction/elimination of maladaptive behavior, community living, and mobility. The several ways to meet provider standards for this service include being an employee of a Home-Health Agency that is enrolled as an MA provider, or by being a Rehabilitation agency, etc. Contact the Department of Human Services for a complete list of licensing options.

Independent Living Skills Therapies

Individual Living Skills therapies include therapeutic recreation, music, and art therapies. Provider standards require meeting the qualifications and certifications within the identified fields.

Modifications and Adaptations

Home modifications include physical adaptations to the home that are necessary to ensure the health, welfare and safety of the individual or that enable the person to function with greater independence in the home. A provider of modification services must meet all professional standards, including licensure and certification and/or training requirements required by Minnesota Statutes or administrative rules.

Night Supervision Services

Night supervision services provide overnight assistance and monitoring of the recipient in his or her home for a period of no more than 12 hours. This service may include understanding and carrying out the individual's behavior programs, reinforcing independent living skills, and assisting incidental daily activities.

Nutrition Services

Nutrition counseling is one or more sessions in which a qualified professional provides advice or guidance to help solve a person's diet-related health problems. Nutrition services must be provided by a registered or a qualified dietitian, or a registered nurse.

Personal Care

Personal care services include assistance with eating, bathing, dressing, personal hygiene, and activities of daily living. Personal Care Assistants (PCA) must be an employee of a personal-care provider organization.

Personal Support

Personal support is non-medical care, supervision and assistance provided to a waiver recipient in the recipient's home or in the community to achieve increased independence, productivity, and inclusion in the community. Minimal employee standards include training in first aid, vulnerable adult law, and medication administration. The service planning team will document in the Individual Service Plan or contractual agreement any additional training experience and/or supervision standards necessary to meet the needs of the recipient.

Prevocational Services

Prevocational services are designed to prepare individuals for paid or unpaid employment but are not job-task oriented. Prevocational services are provided to persons who are not expected to be able to join the general work force or to participate in transitional sheltered workshop services within one year (excluding supported-employment programs). Provider participation includes rehabilitative agencies, comprehensive out-patient rehabilitation facilities, adult day care centers, and providers of vocational rehabilitation services. These programs require either licenses or certifications.

Residential Care Services

Residential-care services are provided to individuals living in a residential-care home. Residential-care homes are currently licensed as board and lodging establishments and are registered with the State Department of Health as providing specialized services and health-related services. Residential-care services are defined as "supportive services" and "health-related services." Health-related services are limited to minimal assistance with dressing, grooming and bathing, as well as providing reminders to residents to take medications that are self-administered, and, if requested, providing storage for medications.

Respite Care

Respite-care services may be provided on a short-term basis because of an absence or a need for relief of those persons who normally provide the care. Respite care is not provided for persons residing in corporate foster-care settings.

Respite care may be provided for recipients who either live out of the home or who live in their own home--consequently, two standards apply. For CADI, TBI, and CAC waiver recipients, out-of-home respite care must be provided in a facility approved by the local county agency, such as a hospital, nursing facility, foster home, camp, licensed day-care provider, or community residential facility. For CADI, TBIW, and CAC waiver recipients, in-home respite-care providers must be individuals who meet state qualifications of registered or licensed practical nurses, home-health aides, or personal-care assistants who have been specifically trained to provide care to the person. MR/RC-respite services may be provided in an individual's home, a licensed foster home, or the home of an unlicensed caregiver.

Specialist Services

Specialist services provide assessments, program development, training and supervision of staff and caregivers, monitoring of recipient-specific program implementation, and evaluation of service outcomes in areas specific to the needs of the recipient. This service is to assure competency by staff and caregivers in service provisions.

24-Hour Emergency Assistance

24-Hour Emergency Assistance is a recipient provision of ready access to assistance from a qualified provider. Twenty-four-Hour Emergency Assistance services are limited to those individuals who live in their own home, do not receive 24-hour supervision, and would otherwise require extensive, routine supervision, or who live with a family member or a primary caregiver who would otherwise require extensive supports in the absence of this service to secure help in the event of an emergency.

Structured-Day Program

Structured-day program (SDP) services are directed at the development and maintenance of community living skills. The service takes place in a non-residential setting separate from the home in which the recipient lives. Services are normally furnished in two or more hours per day, one or more days per week, and on a regularly scheduled basis.

Supported-Employment Services

Supported-employment services consist of paid employment for persons for whom competitive employment at or above the minimum wage is unlikely and, who, because of their cognitive and/or physical limitations require intensive, ongoing support to perform in a work setting.

Supported-employment services through the MR/RC waiver must be provided on an individual basis, and are not reimbursable if delivered in work enclaves.

Transportation

Transportation services enable the person to gain access to services specified in the individual-care plan. Whenever possible, family neighbors, friends, or community agencies who can provide transportation without charge, should be utilized.