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## **DISABILITY SUMMIT**

### **Medicaid Waivers in Virginia**

#### 1. What Virginia's Medicaid Waiver/Program Offers

Virginia has 2 types of Medicaid Waivers: Managed Care Waivers (CCC+ Waiver) and Developmental Disability Waivers (3 subsets of DD Waivers).

- A. CCC+ Waiver – for elderly (over 55) and persons of all ages who meet nursing facility eligibility criteria, both medically and functionally, to allow the individual to remain in his or her home with personal care aid services, adult day health care, and respite care, personal emergency response system (PERS), Environmental Modifications, medication monitoring, and more. (This is the redesigned former EDCD Waiver)
- B. Building Independence Waiver (BI) – for adults 18 with developmental disabilities and older able to live independently in the community. The individuals own, lease, or control their own living arrangement and supports are brought into the person's home. Supports are episodic/periodic in nature. (This is the redesigned Day Support Waiver) 12VAC30-120-1500.
- C. Family and Individual Supports Waiver (FIS) – for children and adults with developmental disabilities living with their families, friends, or in their own homes including supports for those with some medical or behavior needs. This Waiver offers more than drop in supports, but less than 24/7 awake and active supports. The majority of people with developmental disabilities are expected to use this Waiver. (This is the redesigned former DD Waiver) 12VAC30-120-700.
- D. Community Living Waiver (CL) – for children and adults with developmental disabilities requiring 24/7 services and supports due to exceptional medical, hands on care, and/or behavioral support needs. Includes residential supports and full array of medical, behavior and non-medical supports. (This is the redesigned former ID Waiver) 12VAC30-120-1000.

- E. Definition of Developmental Disability – to be eligible for any of the above DD Waiver programs (not the CCC+ Waiver) the applicant must have a developmental disability which is defined at Virginia Code § 37.2-100. Definition:

"Developmental disability" means a severe, chronic disability of an individual that (i) is attributable to a mental or physical impairment, or a combination of mental and physical impairments, **other than a sole diagnosis of mental illness**; (ii) **is manifested before the individual reaches 22 years of age**; (iii) is likely to continue indefinitely; (iv) results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency; and (v) reflects the individual's need for a combination and sequence of special interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated. An individual from birth to age nine, inclusive, who has a substantial developmental delay or specific congenital or acquired condition may be considered to have a developmental disability without meeting three or more of the criteria described in clauses (i) through (v) if the individual, without services and supports, has a high probability of meeting those criteria later in life.

2. Eligibility Criteria for each Waiver Program

- A. The Community Services Board in each local jurisdiction is responsible for DD Waiver eligibility determination, waitlist documentation and services. Local Departments of Social/Family Services or Health Departments are responsible for CCC+ Waiver eligibility.
- B. CCC+ Waiver Eligibility Factors.
- a. Meet criteria for long-term nursing level of care (determined by Uniform Assessment Instrument).
  - b. Meet Medicaid financial eligibility.
  - c. Willing to accept services within 30 days.
- C. DD Waivers Eligibility Factors.
- a. Meet level of care criteria (determined by the VIDES).
  - b. Meet Medicaid financial eligibility.
  - c. Willing to accept services within 30 days.
- D. VIDES – new initial eligibility tool is VIDES (Virginia Intellectual and Developmental Disability Eligibility Survey). 12VAC30-120-535.
- a. Replaces the Level of Functioning Survey (LOF)

- b. Includes versions for infants (0-2), children (3-17) & adults (18+).
  - c. Infants must meet 2 out of 5 categories. Child and adult VIDES have 8 categories. Children and adults must meet 3 out of 8 categories.
  - d. Screening should be done within 45 days of request.
- E. Waiver Experts are trained and assigned to each locality. They provide training and share materials and supports. SCs (Support Coordinators), often called CMs (Case Managers), provide support coordination/case management services to individuals enrolled in one of the DD waivers.
- F. If a slot is not available, the SC:
- a. Determines the individual's priority need level (1-3).
  - b. Places the person's name on the wait list.
  - c. Completes a critical needs summary documenting the person's level of urgency.
- G. Supports Intensity Scale (SIS) is used when person receives a DD Waiver slot an assessment tool evaluates practical supports. 12VAC30-120-545
- a. Measures support needs in the areas of home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy.
  - b. Administered by qualified, trained interviewers.
  - c. Used in determining individual support levels, which are tied to reimbursement levels for some services.
- H. Levels & Tiers There are seven individual levels for all adults and up to four reimbursement tiers for some services. Reimbursement to providers is based on the support need level. Tiers 1 through 7 are as follows:
- a. Mild Support Needs
  - b. Moderate Support Needs
  - c. Mild/Moderate Support Needs with Some Behavioral Support Needs
  - d. Moderate to High Support Needs
  - e. Maximum Support Needs
  - f. Intensive Medical Support Needs
  - g. Intensive Behavioral Support Needs

See 12VAC30-120-570 Tiers of Reimbursement.

### 3. What Services are Provided for each Program

- A. Services provided under the Developmental Disability Waivers are listed among the three Waiver programs: Community Living Waiver (CL), Family and Individual Supports Waiver (FIS) & Building Independence Waiver (BI).

1. ***In Home Support Services*** – Up to 24/7 1 on 1 services in the home focused on life skills. CW & FIS.
2. ***Companion Services*** – 1 on 1 fellowship and monitoring. CW & FIS.
3. ***Respite*** – Supplemental annual hours of personal care to provide relief to the unpaid caregiver. CW & FIS
4. ***Environmental Modifications*** – Up to \$5,000 per year to modify a primary home or vehicle. CW, FIS, & BI.
5. ***Personal Emergency Response System*** – Electronic safety monitoring system linked to emergency services. CW, FIS & BI.
6. ***Electronic Home-Based Supports*** – Support items to be used in the home for greater independence in lieu of paid staff during some hours of the day.
7. ***Assistive Technology*** – Up to \$5,000 per year on portable items to assist with independence/safety. CW, FIS & BI.
8. ***Crisis Supports*** (center and community based) – Crisis prevention and stabilization. CW, FIS & BI.
9. ***Community Engagement*** – Direct assistance in promoting and developing community relationships that promote integration and self-determination. CW, FIS & BI (see community coaching below).
10. ***Non-medical Transportation*** – Reimbursement for transport to locations associated with an individual's support plan and goals. CW, FIS & BI.
11. ***Private Duty Nursing*** – 1 on 1 continuous care nursing for people with complex medical needs. CW & FS.
12. ***Skilled Duty Nursing*** – Intermittent nursing. CW & FIS.
13. ***Therapeutic Consultations*** – Limited consultation with therapists in qualifying areas. CW & FIS.
14. ***Transition Services*** – Funding and supports to assist people with leaving institutional settings. CW, FIS & BI.
15. ***Individual and Family/Caregiver Training*** – Training on disability needs for primary caregivers. FIS only.
16. ***Supported Employment*** – Training and support in a competitive job where persons without disabilities are employed. CW, FIS & BI.
17. ***Workplace Assistance*** - Includes support to individuals who have completed job development and job placement training (or near completed) but require more than typical follow-along services to maintain stabilization in their employment. CW & FIS.
18. ***Community Coaching*** – Designed for people who need 1:1 support to build a skill or set of skills to address a barrier to participating in Community Engagement. CW, FIS & BI (See Community Engagement above).
19. ***Group Day Services*** – At no more than 1:7 ratio, includes skill-building and support for the acquisition or retention of self-help, socialization, community integration, employability and adaptive skills. CW, FIS & BI.
20. ***Independent Living Supports*** – A service provided to adults (18 and older) that offers skill building and support to secure a self-sustaining, independent living situation in the community and/or may provide the support necessary to maintain those skills. BI only.

21. ***Shared Living*** – Medicaid payment for portion of the total cost of rent, food, and utilities that can be reasonably attributed to a person who has no legal responsibility to support the individual and resides in the same household as the individual. CW, FIS & BI.
22. ***Supported Living*** – Residential supports are provided in a licensed or DBHDS authorized apartment/house and enable the individuals to: have access to ‘round the clock’ support; a timely response when needed; support to develop skills needed for daily life.
23. Regulations for covered services are at: 12VAC30-120-1020 through 12VAC30-120-1031.

B. Services provided under the CCC+ Waiver are aimed at allowing the individual to remain in his or her home rather than a facility and provides personal care aid services, adult day health care, respite care, personal emergency response system (PERS), medication monitoring, and other services on an as needed basis.

4. What Happens after Eligibility is Determined?

DD Waiver Slots are Assigned by the Waiver Slot Assignment Committees.

A. Waiver Slot Assignment Committees (WSACs): An impartial body of trained volunteers for each locality/region responsible for assigning waiver slots according to urgency of need.

1. WSACs will meet as required to determine person with the highest level of need.
2. Not possible for one CSB to receive another CSB’s slots.
3. WSAC committee members must confirm whether they know individuals to be reviewed. If so, they must be absent from decision-making for that slot assignment.

B. Priority Status Slot assignments on the wait list are based on priority determination. 12VAC30-120-580.

1. **Priority One Status** – Will need waiver services within one year and meets specific criteria as follows.
  - a. An immediate jeopardy exists to the health and safety of the individual due to the unpaid primary caregiver having a chronic or long-term physical or psychiatric condition or conditions that significantly limit the ability of the primary caregiver or caregivers to care for the individual; there are no other unpaid caregivers available to provide supports.
  - b. There is immediate risk to the health or safety of the individual, primary caregiver, or other person living in the home due to either of the following conditions:
    - (1) The individual's behavior or behaviors, presenting a risk to himself or others, cannot be effectively managed by the primary caregiver or unpaid

- provider even with support coordinator/case manager-arranged generic or specialized supports; or
- (2) There are physical care needs or medical needs that cannot be managed by the primary caregiver even with support coordinator/case manager-arranged generic or specialized supports;
- c. The individual lives in an institutional setting and has a viable discharge plan; or
  - d. The individual is a young adult who is no longer eligible for IDEA services and is transitioning to independent living. After individuals attain 27 years of age, this criterion shall no longer apply.
2. **Priority Two Status** - May require waiver services in one to five years and meets specific criteria. Specific criteria as follows:
- a. The health and safety of the individual is likely to be in future jeopardy due to:
    - (1) The unpaid primary caregiver or caregivers having a declining chronic or long-term physical or psychiatric condition or conditions that significantly limit his or her ability to care for the individual;
    - (2) There are no other unpaid caregivers available to provide supports; and
    - (3) The individual's skills are declining as a result of lack of supports;
  - b. The individual is at risk of losing employment supports;
  - c. The individual is at risk of losing current housing due to a lack of adequate supports and services; or
  - d. The individual has needs or desired outcomes that with adequate supports will result in a significantly improved quality of life.
3. **Priority Three Status** – May not present for waiver services in over five years as long as the current supports and services remain. Specific criteria as follows:
- a. The individual is receiving a service through another funding source that meets current needs;
  - b. The individual is not currently receiving a service but is likely to need a service in five or more years; or
  - c. The individual has needs or desired outcomes that with adequate supports will result in a significantly improved quality of life.
4. An assessment tool is used to evaluate practical supports. It is called the Supports Intensity Scale or SIS. It measures support needs in the areas of home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy.
5. Clients should be advised to tell SC or CM all details about the disabled person and living situation in that points are given for specific details which can elevate a person's priority within the waitlist.

C. Emergency/Reserve Slots – These slots support emergencies and movement between the DD Waivers. These slots are managed by DBHDS. 12 VAC30-120-580E.

1. Emergency slots for individuals that meet at least one of the emergency criteria of this subdivision to be eligible for immediate access to waiver services without consideration to the length of time they have been waiting to access services. The criteria shall be one of the following:

- a. CPS or APS has substantiated abuse/neglect against the primary caregiver and has removed the individual from the home; or for adults, where abuse/neglect has not been substantiated but corroborating information from other sources indicate there is an inherent risk present. There are no other caregivers available to provide support services to the individual.
- b. Death of primary caregiver and/or lack of alternate caregiver coupled with the individual's inability to care for him/herself and danger to self or others without supports.

2. Reserve slots may be used for transitioning an individual who, due to documented changes in his support needs, requires a move from the DD waiver in which he is presently enrolled into another of the DD waivers to access necessary services. An individual who needs to transition between the DD waivers shall not be placed on the DD waiting list. 12 VAC30-120-580F

5. Possible Barriers/Complications in Accessing Services/Other

A. Appeals

Individuals and family/caregivers do have the right to appeal the application of the prioritization criteria (in the event that such application results in a reduction of access to services), emergency criteria, or reserve criteria to their circumstances pursuant to 12VAC30-110. All notifications of appeal shall be submitted to DMAS. 12 VAC30-120-580C.

B. Long-term waitlisted Individuals prior to 2016 change are moved to the shared waiting list now used across Virginia.

C. An individual may utilize a CCC+ Waiver while on a waitlist for a Disability Waiver.

D. Commonwealth Coordinated Care Plus (CCC+) is the name of Medicaid's Managed Care for management and delivery of services. It is the same name as the CCC+ Waiver. It is important to always check to make sure if the individual is CCC+ Waiver or CCC+ Managed Care. There are 6 Managed Care Companies or MCO's in Virginia:

1. Aetna Better Health of Virginia
2. Anthem Health Keepers Plus

3. Magellan Complete Care of Virginia
4. Optima Health Community Care
5. United Healthcare
6. Virginia Premier Elite Plus