



HABILITATION SUPPORTS WAIVER (HSW) OR (HAB)

Kristina Cox
Senior Resource Program Analyst
Macomb Oakland Regional
Center, Inc.
Clinton Township, MI



OVERVIEW

- ❖ What is the HAB Waiver
- ❖ Who is eligible to apply for a waiver
- ❖ What are the advantages of receiving HSW and the additional services offered
- ❖ How do you apply

MICHIGAN STATE PLAN (B3) (ISPA)

- ❖ In accordance with Federal regulations at 42 CFR 430.10, the State Plan is a comprehensive written statement describing the nature and scope of the Michigan Medicaid program giving assurance that it will be administered in conformity with the specific requirements of Title XIX, all applicable Federal Regulations and other official issuances regarding Medicaid as published by the U.S. Department of Health and Human Services (HHS).
- ❖ **The Michigan Medicaid State Plan is an agreement between the state and federal government that identifies the general health care services, reimbursement, and eligibility policies in effect under Michigan Medicaid.** It is the basis for the federal government (CMS/HHS) to pay its federal financial participation (FFP) for the program's operation. The plan is written on a more general level than contained in program policy.
- ❖ An agreement between the State of Michigan and the Federal Government
- ❖ Michigan has to follow Federal guidelines



AUTHORITY

- Under Section 1915 (c) of the Social Security Act, states may request a waiver of certain federal requirements in order to provide specified home & community based services to designated enrolled participants who would otherwise require institutional services reimbursed through Medicaid.
- Michigan provides behavioral health and developmental disability services through the Michigan State Plan.
- States can ask for a waiver on certain requirements to allow us to provide services in a community setting rather than in an institution.
 - Fun Fact: MORC helped close all institutions in Michigan!
- The Habilitation Supports Waiver (HSW) operates concurrently with the Michigan State Plan.
 - This allows for those on the HSW to receive the same services AND some additional services
- **It is important to understand the federal authority under which the program operates because that dictates the requirements Michigan must follow.**



HABILITATION SUPPORTS WAIVER (HSW/HAB)

Medicaid Provider Manual – Chapter: Behavioral Health and Intellectual and Developmental Disability Supports and Services Section 15: Habilitation Supports Waiver for Persons with Developmental Disabilities

<http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>

Hab waiver does not have an age limit



ELIGIBILITY REQUIREMENTS

- ✓ **Must have a developmental disability** (defined on the next slide)
- ✓ **Must be living in a community setting**
 - ✓ Family Home
 - ✓ Private Residence
 - ✓ Group Home (cannot be licensed for 7 or more beds)
 - ✓ The group home must already be found in compliance with Home and Community Based Services (HCBS)
- ✓ **Must have active Medicaid**
 - ✓ An individual can have a Medicaid Spenddown but must be able to meet it each month
- ✓ **Must meet ICF/IID Level of Care** (defined in a later slide)
- ✓ **Must have a need for Active Treatment** (defined in a later slide)
- ✓ **Receive at least one HSW service per month once enrolled in addition to a Supports Coordination visit**
 - ✓ CLS or Vocational Services
 - ✓ Medical necessity criteria should be used in determining the amount, scope and duration of services and supports through the Individual Plan of Service (IPOS)
- ✓ **May not be enrolled simultaneously in any other 1915(c) waiver.**



DEVELOPMENTAL DISABILITY AS DEFINED IN THE MICHIGAN MENTAL HEALTH CODE

“Developmental Disability” means either of the following:

(a) If applied to an individual older than 5 years of age, a severe, chronic condition that meets all of the following requirements:

- Is attributable to a mental or physical impairment or a combination of mental and physical impairments.
- **Is manifested before the individual is 22 years old.**
- Is likely to continue indefinitely.
- **Results in substantial functional limitations in 3 or more of the following areas of major life activity:**
 - Self-care
 - Receptive and expressive language
 - Learning
 - Mobility
 - Self-direction
 - Capacity for independent living
 - Economic self-sufficiency
- Reflect the individual’s need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated.

(b) If applied to a minor from birth to 5 years of age, a substantial developmental delay or a specific congenital or acquired condition with a high probability of resulting in developmental disability as defined in subdivision (a) if services are not provided.



ICF/IID LEVEL OF CARE

- To be eligible for the waiver, an individual must also be determined to **need the level of care provided by an Intermediate Care Facility for individuals with Intellectual Disabilities (ICF/IID)** if not for waiver services. This means that, if the individual does not get HSW services in the community, he or she would need an active treatment program of specialized and/or generic training, treatment, health and related services directed toward the acquisition of behaviors necessary to function with as much self-determination and independence as possible.
- 483.440©(6)(iii) states: for those clients who lack them, **training in personal skills** essential for privacy and independence (including, but not limited to, toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs), until it has been demonstrated that the client is developmentally incapable of acquiring them. **Guidelines: The receipt of training targeted toward amelioration of these most basic skill deficit areas is a critical component of the active treatment program needed by individuals who are eligible for the ICF/IID benefit, and therefore, is a required ICF/IID service.**
- In short this means they need round the clock supports with training in areas of personal skills, not limited to personal care. The individual must be learning a skill that would help in keeping them out of an institution.



ACTIVE TREATMENT

Active treatment does not include services to maintain generally independent clients who are able to function with little supervision or in the absence of a continuous active treatment program. *Guidelines:* The regulations define the target population eligible for the ICF/IID benefit, by defining the services that are required for a facility to provide in order for it to qualify as an ICF/IDD and receive Federal Financial Participation (FFP). At the front end, one of the “required services” is **training in basic fundamental skills**. The type of skills described in W242, by their very nature, target a population who have significant deficits in growth and development.



SERVICES AVAILABLE

Community Living Supports

Enhanced Medical Equipment and Supplies

Enhanced Pharmacy

Environmental Modifications

Family Training

Fiscal Intermediary (New FY20)

Good and Services

- Self-Determination Only

Non Family Training (New FY20)

Out-of-home Non-Vocational Habilitation

Overnight Health & Safety* (New FY20)

- Must live in a Specialized Home

Personal Emergency Response System (PERS)

Prevocational Services

Private Duty Nursing (PDN)

Respite

Supported Employment



HSW VS STATE PLAN

- An individual on the HSW can receive both State Plan services and HSW services
- State plan is not limited to a Developmental Disability
- State Plan requirements are not as stringent and services are more flexible
- Hab Waiver is always payer of last resort
- Hab Waiver has a limited number of slots available
 - Michigan has 7,481 slots at any given point in the year
 - Each PIHP region has a specific number of allotted slots

CROSSWALK OF HSW TO STATE PLAN SERVICES

HSW Services

Community Living Supports -----
 Enhanced Medical Equipment & Supplies -----
 Enhanced Pharmacy -----
 Environmental Modifications -----
 No Corresponding Service -----
 Family Training -----
Non Family Training -----
Goods & Services -----
 Fiscal Intermediary -----
 No Corresponding Service -----
 Out-of-Home Non-Vocational Habilitation -----
 No Corresponding Service -----
Overnight Health & Safety -----
 Personal Emergency Response System (PERS) -----
 No corresponding service -----
 Prevocational Services -----
Private Duty Nursing -----
 Respite Care -----
 No Corresponding Service -----
 Supported Employment -----
 No Corresponding Service -----

State Plan Services

Community Living Supports
 Assistive Technology
 Enhanced Pharmacy
 Environmental Modifications
 Crisis Observation Care
 Family Support & Training
No Corresponding Service
No corresponding Service
 Fiscal Intermediary
 Housing Assistance
 Skill Building Assistance (*Out of Home Adaptive Skills Training*)
 Peer Delivered or Peer Operated Support Services
No Corresponding Service
 Included in Assistive Technology
 Prevention Direct Service Models
 Skill Building Assistance (*Work Preparatory Skills*)
No Corresponding Service
 Respite Care Services
 Support & Service Coordination
 Supported/Integrated Employment Services
 Wraparound Services for Children & Adolescents



NON-FAMILY TRAINING

- Provides coaching, training, supervision and monitoring of CLS and respite staff by a clinical professional working within the scope of their practice
- Professional staff work with CLS and respite staff to implement the individual's IPOS, with focus on all behavioral health services designed to assist the consumer in acquiring, retaining and improving self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings.
- The activities of the professional staff ensure the appropriateness of services delivered by CLS and respite staff and continuity of care. The service provider is selected on the basis of his/her competency in the aspect of the IPOS on which training is conducted.



GOODS & SERVICES

The purpose of Goods and Services is to promote individual control over, and flexible use of, the individual budget by the HSW beneficiary using arrangements that support self-determination and facilitate creative use of funds to accomplish the goals identified in the individual plan of services (IPOS) through achieving better value or an improved outcome.

Goods and Services are available only to individuals participating in arrangements of self-determination whose individual budget is lodged with a fiscal intermediary.

- ❖ Must be Self-Determined
- ❖ Substitute for human assistance
- ❖ Promote independence, productivity, community inclusion
- ❖ Identified using the PCP process and identified in IPOS
- ❖ Coverage may not be used to acquire goods and services that are prohibited by federal or state laws (purchase/lease/routine maintenance of a vehicle)



OVERNIGHT HEALTH & SAFETY SUPPORTS

- ❖ Will allow an individual to remain at home safely after all other available preventative interventions/appropriate assistive technology, environmental modifications and specialty supplies and equipment (Lifeline, PERS) have been undertaken to ensure the least intrusive and cost-effective intervention is implemented.
- ❖ Purpose is to enhance individual safety and independence with a provider supervising the health and welfare of a beneficiary overnight.
- ❖ The service normally involves the co-provision of several services through a provider in order to achieve the purpose of the services. Services typically fall into this category of “round the clock” by the nature and institutional level of care required for HCBS Waiver participants.
- ❖ Intended to supplement other HCBS (CLS, respite) that are provided to the individual as part of a comprehensive array of specialized waiver or developmental disabilities services (SC, peer-delivered)
- ❖ Cannot be used when the need is caused by a medical condition or in anticipation of a medical emergency
- ❖ Cannot be living in a licensed setting
- ❖ Cannot be performed by a responsible relative (spouse, parent of minor) or guardian
- ❖ Covers the hours of 8pm-8am
- ❖ Coordination of Services and Care
- ❖ Staff Qualifications: Direct Support Professional/Aide



PRIVATE DUTY NURSING (PDN)

- Skilled nursing interventions
- Used to meet an individual's health need that are directly related to their developmental disability.
- Includes the provision of nursing assessment, treatment and observation provided by a licensed nurse
- Available for individuals who require more individual and continuous care than periodic or intermittent nursing available through state plan services (Home Health)
- PDN is a state plan Medicaid benefit for beneficiaries **under age 21** who meet the medical criteria as defined in the PDN chapter of the Medicaid Provider Manual.
 - www.Michigan.gov/medicaidproviders>>policyandforms>>medicaidprovidermanual
 - Individuals under 21 years old, their health care provider refers them to a PDN provider to assess eligibility
 - Individuals 21 and older must be on the HAB Waiver or MI Choice Waiver
 - Must require at least one of the following HSW services:
 - Community Living Supports
 - Out of Home Non-Vocational Habilitation
 - Prevocational or Supported Employment



PRIVATE DUTY NURSING (PDN)

When should PDN be considered?

- Individuals receiving PDN are approaching their 21st birthday
- Individuals receiving PDN thru private insurance and exhausting their benefit
- Individual has a significant change in health status

APPLYING FOR THE HAB WAIVER

- ❖ Contact your Supports Coordination Agency to request
- ❖ The Hab Coordinator will put together an application packet and send to individual and/or guardian to sign
- ❖ Supports Coordinator along with Hab Coordinator will complete packet and send to appropriate county / MDHHS for processing
- ❖ Hab Waiver is renewed by coordinating agency yearly and by individuals/guardians every three years
 - ❖ Individual/guardian can choose to terminate from the waiver at any time

SLOT PRIORITY

- People age 21 and older who need PDN and meet HSW eligibility
 - Not all will qualify for the HSW
 - MI Choice Waiver
 - Transition should start 4-6 months prior to their 21st birthday
 - If the family would like to keep the same PDN agency, the agency will need to be part of the PIHP provider network
- Children aging off the Children's Waiver
 - Not all age-off's will qualify
 - Transition planning should start at least 6 months in advance of the child's 18th birthday
 - Must be eligible and meet all criteria
 - Effective date would be the first day of the month following their 18th birthday
- People who are determined to be at a high risk of institutional placement

FREQUENTLY ASKED QUESTIONS

❖ What is being waived?

- ❖ You are waiving the right to receive these services in an ICF/IID or equal setting

❖ Will this change the services that I am currently receiving?

- ❖ No. Enrollment does not change your current services. It opens up the possibility of receiving additional services not covered under the State Plan.

❖ The State Plan offers services that the Hab Waiver does not. Can I still get these services?

- ❖ Yes, you can still utilize these services as long as they are medically necessary.

❖ What happens to the waiver if the individual moves?

- ❖ If the individual moves within the state of Michigan to another community setting, the waiver will transfer with them.
- ❖ If the individual moves out of state, the hab waiver will have to be terminated.
- ❖ If the individual moves into a nursing home, the hab waiver will have to be terminated.

❖ What happens if an individual ends up in a hospital and/or nursing home?

- ❖ Once the individual has been out of the home for an entire calendar month, we would have to inactivate the hab waiver however the individual would remain enrolled.
- ❖ An individual can only be out of the home for 90 days before we would have to consider terminating the waiver.
 - ❖ If termination is necessary, the individual could re-apply once they have returned to a community setting



QUESTIONS

KRISTINA COX
KRISTINA.COX@MORCINC.ORG
(586) 263-8664

