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Medicaid Home and Community Based Services

Aging and Disability Services Division

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Department of Health and Human Services

Helping people. It's who we are and what we do.



Agenda

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What Are Home and Community Based Services?

- Home and Community Based Services (HCBS) provide opportunities for individuals to receive services in their own home or community rather than institutions or other isolated settings
- Programs serve a variety of targeted populations, such as people with intellectual or developmental disabilities, physical disabilities, and the frail elderly
- HCBS are generally non-medical services
- HCBS are person centered and tailored to the individual receiving the service



Introduction to HCBS Waivers

- HCBS waivers began in 1981 to correct the “institutional bias” of Medicaid funding
- The “bias” was that individuals could get support services if institutionalized, but if they wanted to return to the community, they could not get Medicaid-funded home and community-based services
- HCBS were expanded with the passage of the Americans with Disabilities Act and Olmstead decision
- Section 1915 (c) of the Social Security act was changed to allow states to ask for "waivers" of existing Medicaid regulations
- Allows states to use the Medicaid money for community services that would have been spent on institutional care



Introduction to HCBS Waivers, continued

- HCBS waivers are intended to give states flexibility to serve new populations and/or provide services in innovative ways
- States can specify target populations and available services
 - Cannot pay for the same services as Medicaid State Plan, but can supplement Medicaid State Plan services
 - Cannot pay for duplicative services provided by other federal funding sources, such as the IDEA or IV(e)
 - Cannot pay for any service to individuals residing in an institution (nursing home, hospital, jail, Intermediate Care Facility, etc.)
- Waivers must be cost-neutral. Annual total cost of the waiver program cannot exceed the total cost of institutionalization of all individuals on the waiver



Centers for Medicare and Medicaid Services

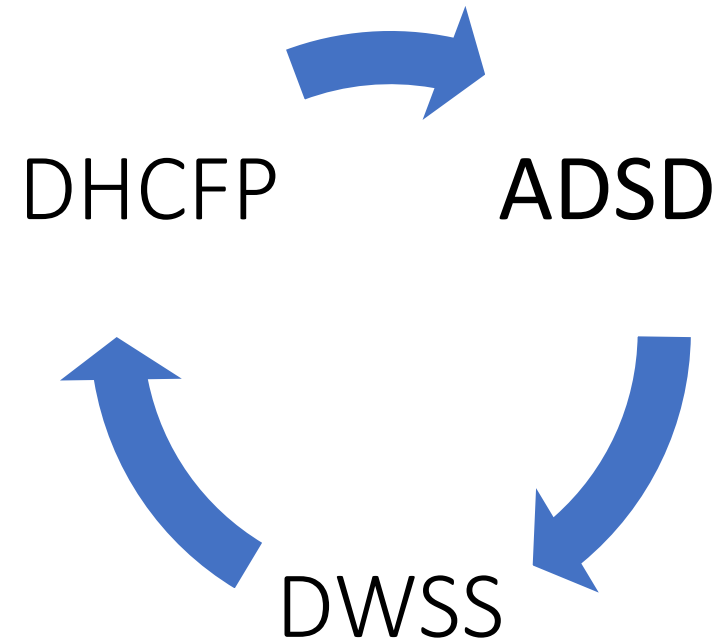
Community Based Settings Requirements

- Home and work settings must be integrated within the community and support full access to the community
- Settings must:
 - Be selected by the individual from multiple options
 - Ensure the individual's rights to privacy, dignity, respect, and freedom from coercion and restraint
 - Optimize individual initiative, autonomy and independence in making life choices
 - Facilitate individual choice regarding services and supports and who provides them
 - Ensure the individual receives services in the community to the same degree of access as individuals not receiving Medicaid HCBS
 - Ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.



HCBS Waiver Intake/Approval Process

- Aging and Disability Services Division (ADSD)
 - Case Manager will contact the applicant to schedule an in-person assessment
 - Assist with application completion, gathering of documents and submitting information to sister agencies for review
- Division of Welfare and Supportive Services (DWSS)
 - Review the application and supporting documentation for financial approval
 - If needed, may request additional information to determine eligibility
 - ADSD Case Manager will assist the applicant with this request
- Division of Health Care Financing and Policy (DHCFP)
 - Reviews supporting documentation from ADSD for Waiver approval





Financial Eligibility - DWSS

- Individuals must be at or below 300% of the Social Security Income (SSI) Federal Benefit Rate for their household size
- Individuals cannot have more than \$2,000 in resources
- Must be a resident of the State of Nevada
- Must be a United States Citizen or a Lawful Permanent Resident



Home and Community Based Waivers offered by ADSD

- Frail Elderly (FE) - serves individuals aged 65 or older that meet a nursing facility level of care
- Physically Disabled (PD) - serves individuals of all ages who have a documented physical disability that meet a nursing facility level of care
- Intellectual/Developmental Disability (I/DD) - serves individuals of all ages who have a documented intellectual or developmental disability that meet a nursing or intermediate care facility level of care



Waivers for the Frail Elderly and Physically Disabled



Intake Process

- Individuals apply at the local ADSD office based on their geographical location
- The intake specialist assists the applicant to gather information to determine if the individual meets eligibility criteria
- Once the information is gathered, a waiver slot is available the application is sent to DWSS for processing
- Once approved, a Case Manager is assigned to assist with establishing services



Service Need Determination

- A Social Assessment is conducted to determine the services needed which are included in the Person-Centered Plan (PCP).
- A list of Medicaid enrolled providers is supplied to the individual to assist in the selection of a service provider
 - The Case Manager will contact the chosen provider to determine availability
- Once the service provider is confirmed, the Case Manager creates a service authorization so that service delivery may begin



HCBS FE and PD Waiver Services

Frail Elderly:

- Case management
- Chore
- Homemaker
- Respite
- Personal
Emergency
Response System
(PERS)
- Adult Day Care
(social model)
- Adult companion
- Augmented
Personal Care

Physically Disabled:

- Case management
- Chore
- Homemaker
- Respite
- PERS
- Attendant Care
- Home Delivered
Meals
- Specialized Medical
Equipment
- Environment
Accessibility
Adaptation
- Assisted Living



HCBS FE and PD Waiver Services Defined

- **Case Management**
 - Identification of resources and assisting recipients in locating and gaining access to waiver services, as well as needed medical, social, educational and other services regardless of the funding source.
- **Chore**
 - Chore services are intermittent in nature and may be authorized as a need arises for the completion of a specific task which otherwise left undone poses a home safety issue.
- **Homemaker**
 - Assistance with light housekeeping, meal preparation, laundry and essential shopping.
- **Adult Companion**
 - Provides non-medical care, supervision and socialization to a functionally impaired recipient in his or her home or place of residence, which may provide temporary relief for the primary caregiver.
- **Respite**
 - Respite care is provided in the recipient's home on a short-term basis because of the absence or need for relief of the primary caregiver.
- **Personal Emergency Response System**
 - An electronic device connected to the phone that enables persons at risk to secure help in an emergency for recipients who live alone in a private residence, or who are alone for significant parts of the day in that residence, have no regular caregiver for extended periods of time, and who would otherwise require extensive routine supervision.



HCBS PD Waiver Services Defined

- **Attendant care**
 - Extended State Plan Personal Care Services (PCS) that include assistance with Activities of Daily Living (ADL), Instrumental Activities of Daily Living (IADL), and accompanying the recipient to appointments as necessary to enable the individual to remain in the community.
- **Home Delivered Meals**
 - The provision of meals to persons at risk of institutional care due to inadequate nutrition. Home Delivered Meals include the planning, purchase, preparation and delivery of transportation costs of meals to a person's home.
- **Specialized Medical Equipment**
 - Includes devices, controls, or appliances that enable participants to increase their ability to perform activities of daily living and/or enable a participant to perceive, control, or communicate with the environment in which they live. Items approved are those not available under the State Plan.
- **Environmental Accessibility Adaptations**
 - Physical adaptations to the home, and are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would require institutionalization.



HCBS FE and PD Waiver Services Provided in the Community or Congregate Settings

- **Augmented Personal Care**

- Augmented personal care provided in a licensed residential facility for groups or assisted living facilities is a 24-hour in home service that provides supervision and assistance for functionally impaired elderly recipients with basic self care and ADL's. This care is over and above the mandatory service provision required by regulation for residential facility for groups. Reimbursement for this service does not include Room and Board.

- **Assisted Living**

- Assisted Living services are provided in a licensed assisted living facility which include 24-hour in home services that provide supervision and assistance for physically disabled individuals with basic self care and ADL's. Reimbursement for this service does not include Room and Board.

- **Adult Day Care**

- Adult Day Care provides socialization in a safe environment for frail, socially isolated, physically or cognitively impaired seniors in order for them to remain in the community. Adult Day Care services include, supervision, monitoring of general well-being and social interaction through scheduled activities and peer contact.
 - Provided in a congregate setting



Waiver Participants and Waitlist

Frail/Elderly

1. 2,539 individuals on the waiver as of February 2024
2. 1,150 individuals on the waitlist as of February 2024

Physically Disabled

- 1,155 individuals on the waiver as of February 2024
- 227 individuals on the waitlist as of February 2024



Intellectual/Developmental Disability Waiver



Intake Process

- Individuals apply at the Regional Center based on the area where they live
- The intake specialist assists the applicant to gather information to determine if the individual meets eligibility criteria
 - *See, e.g.* 42 C.F.R. § 435.1010; 45 C.F.R. § 1325.3; NRS 435
- Once the information is gathered, it is reviewed by an Eligibility Review Committee
- If needed, psychological testing and assessment can be done by the Regional Center to inform eligibility
- If found eligible, the case is opened and assigned to a Service Coordinator



Waiver Services

- Jobs and Day Training Services (Day Habilitation, Prevocational Services, Supported Employment, Career Planning)
- Residential Support Services (intermittent or residential)
- Residential Support Management
- Behavioral Consultation, Training and Intervention
- Counseling (individual and group)
- Non-Medical Transportation
- Nursing Services
- Nutrition Counseling
- Dental Services
- Individual Directed Goods and Services



Types of Jobs and Day Training (JDT)

- Day Habilitation
 - Regularly scheduled activities in a non-residential setting that assist with the acquisition, retention or improvement in self-help, socialization and adaptive skills. Services are not vocational in nature.
- Prevocational
 - Provides for learning and work experience including volunteer work. Services are intended to develop and teach general skills that lead to integrated community employment.
- Supported Employment (Individual and Group)
 - Individual Supported Employment is provided to people that need ongoing supports to obtain and maintain a job in a competitive integrated community work setting.
 - Group Supported Employment provides services and training to 2-8 people who work in a regular business, industry or other community setting.
- Career Planning
 - This is time-limited and focuses on engaging a person in identifying a career direction and developing a plan for achieving competitive integrated employment.



Supported Living Arrangement (SLA)

(Residential Support Services and Residential Support Management)

- Services are individually planned and provided on a continuum of service delivery ranging from intermittent to twenty-four (24) hour SLA
 - Individual's home, family home, shared living home or 24-hour home
- Direct services and protective oversight provided to the individual assists in the acquisition, improvement, retention and maintenance of skills necessary for the individual to successfully, safely and responsibly reside in their home and community
- Residential support managers perform various tasks including to support the health and welfare of the individual



Behavioral Consultation, Training and Intervention

- Behaviorally-based assessment and intervention for people, as well as support, training and consultation to family members, caregivers, and provider staff.
- Services include:
 - Functional Behavioral Assessment
 - Development of behavior support plans
 - Training to the team on behavioral support plan and data collection
 - Monitoring of behavior support plan implementation



Counseling Services

- Counseling services are provided based on the person's need to assure his or her health and welfare in the community and enhance success in community living.
- Services are not covered by Medicaid State Plan
- Services include:
 - Assessment/evaluation
 - Individual and group counseling
 - Therapeutic intervention strategies
 - Risk assessment
 - Skill development
 - Psycho-educational activities



Nursing Services

- Three areas of service include:
 - Medical Management-Registered Nurse (RN) or Licensed Practical Nurse (LPN) services relate directly to medical needs of the person
 - Nursing Assessment-(RN only) identify needs, preferences and abilities of the person
 - Direct Services-(RN or LPN) routine medical and health care services and skilled nursing services
- Services are not covered by Medicaid State Plan



Non-Medical Transportation

- Transportation service allows people to gain access to community services, activities and resources
- Allows people to engage in normal day-to-day, non-medical activities such as going to the grocery store or bank, participating in social events and other civic activities or attending a worship service



Nutritional Counseling

- Assessment of a person's nutritional needs, development of a nutritional plan, training and education of the person and staff
- Performed by a registered Dietician
- Service does not include cost of meals or food items
- Services are not covered by Medicaid State Plan



Dental Services

- Available to adult recipients 21 years and older
- Scope and nature differs from State Plan Dental Service for Adults
- Services and treatments include:
 - Diagnostic procedures
 - Preventative services
 - X-rays
 - Restorative
 - Periodontal
 - Endodontic
 - Dentures/partials
 - Oral surgery
 - Adjunctive general service
 - Occlusal guard and adjustment



Individual Directed Goods and Services

- Services, equipment or supplies that address an identified need or outcome
- Must improve and/or maintain recipient opportunities for full membership in community, ensuring health, welfare and safety of recipient
- Includes the following:
 - Memberships and fees
 - Bed bug extermination
 - Equipment and supplies
 - Home adaptations



Waiver Participants and Waitlist

- 2,711 Individuals on the waiver as of February 2024
- 548 on waiver waitlist statewide as of February 2024



Questions?



Contact Information

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Acronyms

- ADL – Activities of Daily Living
- ADSD – Aging and Disability Services Division
- CMS- Centers for Medicare and Medicaid Services
- DHCFP- Division of Health Care Financing and Policy
- DWSS- Division of Welfare and Supportive Services
- FE – Frail Elderly
- HCBS – Home and Community Based Services
- IADL – Instrumental Activities of Daily Living
- I/DD – Intellectual/Developmental Disability
- JDT – Jobs and Day Training
- LPN – Licensed Practical Nurse
- PCS – Personal Care Services
- PCP – Person Centered Plan
- PD – Persons with Physical Disabilities
- PERS – Personal Emergency Response System
- RN – Registered Nurse
- SLA – Supported Living Arrangement
- SSI – Social Security Income