

Tribal Consultation October 4, 2017



HOPE Waiver - Eligibility

- 65 years or older
- 18 or older with a qualifying disability (SSI/SSDI eligibility)
- Need for at least one waiver service a month
- Meet Nursing Facility Level of Care
- Financial Eligibility
 - 300% of SSI
 - Less than \$2000 in resources

HOPE Waiver – Level of Care Criteria

To meet level of care, the consumer must meet one of these 3 criteria:

- Continuing direct care services which have been ordered by a physician and can only be provided by or under the supervision of a professional nurse. procedures or services; Must require these services once every 24 hours.
- The assistance of another person for the performance of any activity of daily living according to an assessment of the individual's needs
- In need of skilled mental health services or skilled therapeutic services, including physical therapy, occupational therapy, or speech/language therapy in any combination that is provided at least once per week.

HOPE Waiver - Services

- Homemaker Services
- Personal Care Services
- *In-Home Nursing Services*
- Chore Services
- Respite Care
- *Adult Companion Services*
- *Adult Day Services*
- *Specialized Medical Supplies*
- *Specialized Medical Equipment (including Assisted Technology)*
- Emergency Response Systems
- Meals
- *Nutritional Supplements*
- Environmental Accessibility Adaptations
- *Assisted Living*

LTSS Initiative - Expand HCBS - Completed

- Addition of Chore Services: 10/1/2016
- Expansion of Specialized Medical Equipment definition to include Assistive Technology: 10/1/2016
- Increase in earned income allowance for Assisted Living Waiver consumers: 10/1/2016
- Increase in standard needs allowance for In-home Waiver consumers: 10/1/2016
- Reorganization of Adult Service and Aging to Division of Long Term Services and Supports: 4/2017
- Removal of the requirement for a physician's order for Level of Care determination: 7/2017

LTSS Initiative - Expand HCBS - Planned

Target Date: Fall 2017

- Community Transition Supports
- Community Transition Coordination
- Residential Options
 - Community Living Homes
 - Structure Family Caregiving Homes

Community Transition Supports

Community Transition Services enable an individual to establish a basic household and may include any or all of the following expenses:

- A security deposit required to obtain a rental lease for an apartment or house;
- Moving expenses required to occupy and use the residence;
- One-time non-refundable deposits or installation fees to establish utility and other essential service access, e.g., telephone, electricity, heating and water.
- One-time residential cleaning or pest extermination costs required for the individual to occupy the residence; and
- Non-medical transportation necessary to the transition.

Community Transition Supports

Essential household items necessary for a successful diversion as determined by a needs assessment including:

- Small appliances
- One time/initial set up for groceries;
- Consumable goods (e.g. hand soap, detergent, toilet paper, paper towels, cleaning supplies);
- Bathroom, kitchen, and bedroom linens (e.g. hand towels, bath towels, dishrags, and bed sets
 - The Community Transition Specialist will accompany the consumer to purchase essential household items.
 - The total cost of the essential household items must not exceed \$500

Community Transition Coordination

- Available to individuals that are transitioning to a less restrictive setting
- Requires 1 or more Medicaid eligible days
- Assists in identifying, selecting and obtaining paid and unpaid services, integrated housing options
- Available up to 364 days after the date of waiver enrollment
- Available 180 day prior to anticipated transition

Community Transition Coordination

Community Transition Coordination for community transitions shall be person-centered and include:

- An initial assessment and the ongoing reassessment of the individual's strengths and needs;
- Transition care plan development, evaluation and revision;
- Assistance to access service providers;
- Assistance in identifying and securing integrated community housing;
- Information and education on the HCBS Waiver service options, including the individual's rights and responsibilities; and
- Ongoing monitoring of the transition care plan implementation

Residential Options

Structured Family Caregiving Home	Community Living Home
Reside with family/fictive kin	Reside with unrelated individual in a smaller, home setting
Maximum of 2 participants	Maximum of 4 participants
Family or recipient own home	Private individual or agency own home
Family enrolls under qualified, Medicaid enrolled agency	Provider enrolls independently or through qualified Medicaid enrolled agency

LTSS Initiative - Expand HCBS - Planned

Target Date: Spring 2018

- Conflict Free/Externalized Case Management
- Self-Direction