

ATTACHMENT #1

MEDICAID WAIVER FOR INFANTS, TODDLERS & FAMILIES

County MH/MR Program Information Summary

I. State Requirements/Waiver Assurances
A. Eligibility

The Department of Public Welfare assures HCFA that only infants and toddlers up to the age of three who meet the level of care eligibility criteria for care in an ICF/MR or ICF/ORC are eligible for waiver funding for IFSP services. The Department also assures that all children meet eligibility requirements for Medical Assistance and need early intervention services.

The approved waiver application assures that the Department will provide for an evaluation and periodic reevaluations of the need for the level of care indicated in the waiver request when there is a reasonable indication that individuals might need such services in the near future. Under this waiver request, the initial evaluation of level of care must be conducted by a Qualified Mental Retardation Professional, referred to as a Qualified Professional, as defined in 42 CFR 433.430. Reevaluations must also be completed by a Qualified Professional every 12 months. The Department also assures that the County MH/MR Program will be responsible to maintain records of evaluations and reevaluations and assure that evaluations/reevaluations will be done in a timely fashion.

Written documentation of all evaluations and reevaluations will be maintained for a minimum period of three years.

B. Rights and Due Process

The Department of Public Welfare assures HCFA of certain individual and family rights, as a condition of Federal financial participation under the waiver. The Department assures that when an individual is determined likely to require a level of care indicated in its approved waiver request, the individual or his/her legal representative will be:

- a. informed of any feasible alternatives under the waiver; and
- b. given the choice of either institutional or home and community-based services.

The Department also assures that it will provide an opportunity for a fair hearing, under Federal requirements (42 CFR Part 431, subpart E) to individuals who are not given the choice of home or community-based services as an alternative to the Institutional care for the level of care indicated in the approved waiver request, or who are denied the service(s) of their choice, or the provider(s) of their choice.

As part of this assurance, the Department must include the following items in its approved waiver application:

1. a copy of the forms used to comment on freedom of choice and to offer a fair hearing;
2. a description of the agency's procedures for informing eligible individuals (or their legal representatives) of feasible alternatives available under the waiver;
3. A description of the state's procedures for allowing individuals to choose either institutional or home and community-based services; and
4. A description of how the individual (or legal representative) is offered the opportunity to request a fair hearing under Federal requirements (42 CFR Part 431, subpart E).

II. Outline of Related Processes

The following outline summarizes major steps in the eligibility and freedom of choice process for this waiver. Variations in the process can be expected based on individual circumstances. These areas are to be explained in greater detail as part of training and orientation.

1. Early Intervention Process
 - a. Child is referred to County NUVMR Program for intake and is assigned a service Coordinator.
 - b. Child receives MDE which determines need for early intervention.
 - c. Services in IFSP are identified.

- d. EI services begin.
- 2. Medical Assistance Determination
 - a. The child is referred to the CAO for a determination of eligibility for Medical Assistance.
 - b. The family completes a Medical Assistance (ACCESS) application for the child.
 - c. The CAO determines whether the child is eligible for Medical Assistance and issues a notice of eligibility to the family.
- 3. Initial Eligibility for Waiver Funded IFSP Services
 - a. The service coordinator identifies the child as being likely to qualify for ICF/MR/ORC level of care based on DPW criteria.
 - b. The service coordinator explains waiver funding and level of rare eligibility criteria to family and obtains permission to submit screening, evaluation, and assessment information to a Qualified Professional for determination of waiver eligibility.
 - c. The Qualified Professional completes first portion of waiver eligibility determination form (Form No. 123) and forwards to County NUVMR Program for final certification.
 - d. The County MH/MR Program certifies the Qualified Professional's waiver eligibility determination on Form No. 123 and authorizes the service coordinator to advise the family regarding the determination.
 - e. The service coordinator advises the family regarding the child's level of care determination and requests that the family signify their choice to receive waiver funded IFSP services, or ICF/MR/ORC by signing Form No. 456.
 - f. When the family chooses waiver funding for IFSP services on Form No. 456, the service coordinator notifies the County MH/MR Program which ensures that the Form No. 123 is forwarded to the CAO. The County Assistance Office indicates an effective date on the Form No. 123, if applicable. The effective date and FFP cannot precede the dates of the child's waiver eligibility determination, the development of the IFSP. And the family's choice to receive waiver services for the child.
 - g. The CAO issues a notice of waiver eligibility to the family, copying the County MH/MR Program.
 - h. The County MH/MR Program advises the service coordinator and providers of service regarding the effective date of waiver eligibility for purposes of the IFSP and provider billing.
 - i. Waiver funded services are indicated on IFSP and providers begin providing waiver funded IFSP services.
- 4. Annual Recertification
 - a. A Qualified Professional evaluates to determine whether the child continues to meet level of care eligibility criteria based on information available at the time of the re-determination; completes the first portion of the recertification form, Form No. 123?A, and forwards the signed form to the County MH/MR Program.
 - b. The County MH/MR Program certifies whether the child continues to be eligible for waiver funding for IFSP services and files the completed Form No. 123?A. Family and provider notification is not required unless there is a change from the initial determination of the child's eligibility except for the continued need for the level of care provided in an ICF/MR/ORC.
 - c. If the child is determined to no longer be eligible for waiver funded IFSP services, the County NUVMR Program notifies the CAO which issues an advance notice to the family to discontinue waiver funded IFSP services, along with a notice of the family's right to due process.
 - d. The County MH/MR Program advises the service coordinator and providers regarding changes in the child's funding status.
 - e. The County MH/MR Program sends a notice to the family regarding discontinuance of waiver funding 90 days prior to the child's third birthday.
 - f. The CAO sends a notice to the family regarding discontinuance of waiver funding 30 days prior to the child's third birthday.

III. Roles

- 1. Family
 - 1. Chooses to apply for child's Medical Assistance.
 - 2. Participates in MDE and in developing IFSP.
 - 3. Chooses whether child undergoes level of care determination for waiver funded services.
 - 4. Chooses whether to agree to participate in waiver as a source of funding in the IFSP.
 - 5. Participates with provider in the provision of waiver services.
 - 6. Files fair hearing and appeal if freedom of choice assurances are not met to family's satisfaction.
- 2. Service Coordinator
 - a. Assists family in applying for the child's Medical Assistance, if requested by the family.
 - b. Participates in MDE and IFSP.
 - c. Informs family about waiver funding for IFSP services, including information about family rights and waiver eligibility process.
 - d. Assures with the family's permission, that current MDE and IFSP information is provided to the Qualified Professional for purposes of the waiver eligibility determination and recertification.
 - e. Assures that the family signifies their choice to receive waiver funding for IFSP services, non-waiver funded IFSP services or ICF/MR/ORC; and forwards the completed Form No. 456 to the County NUVMR Program.
- 3. Qualified Professional
 - a. Determines with the family's permission whether the child meets level of care eligibility; completes first portion of Form No. 123; and forwards determination to the County MH/MR Program.
 - b. Determines annually whether the child continues to meet waiver eligibility criteria; completes portion of annual recertification Form No. 123?A; and forwards determination to the County MH/MR Program.
- 4. County MH/MR Program
 - a. Completes County MH/MR portion of waiver level of care determination Form No. 123.
 - b. Assures that the family is advised regarding the level of care determination and has chosen waiver funded IFSP services, or ICF/MR/ORC, in accordance with department procedures.
 - c. Forwards completed level of care determination, Form No. ?123, to CAO for notice ?waiver eligibility.
 - d. Advises service coordinator and providers of service regarding level of care determination for purposes of the IFSP and

- provider billing.
- e. Assures waiver funding is available before authorizing services.
 - f. Assures annual recertification of level of care is completed every 12 months, and signs appropriate portion of Form No. 123?A.
 - g. Notifies CAP if child is determined to no longer be eligible for waiver funded IFSP services.
 - h. Retains level of care and freedom of choice documentation for at least three years.
 - i. Offers training to service coordinators and providers, informs families; assures Department requirements are met; corrects problems, and advises the Regional Office of Mental Retardation regarding issues and concerns.
 - j. Attends fair hearings and appeals regarding determinations of level of care or services.
5. CAO
- a. Determines Medical Assistance eligibility for the child.
 - b. Notifies family of child's eligibility for Medical Assistance.
 - c. Upon receipt of Form No. 123 or Form No. 123?A indicating eligibility for waiver services, issues notices of waiver eligibility, suspensions and denials, with notice of family right to due process.
 - d. Issues notice of discontinuance of waiver funded IFSP service to family and County MH/MR Program.
 - e. Indicates effective date of waiver eligibility on Form No. 123, as appropriate.

How do the decisions around Early Intervention funding flow?



