Overview of Medicaid Waiver
Programs in Connecticut

Department of Social Services (DSS) Waivers

Connecticut Home Care Program for Elders - Serves elders (65 years of age and older) who are either at risk of institutionalization or meet nursing home level of care. Clients must meet functional and financial eligibility criteria. Services include homemaker, companion, personal emergency response system, meals on wheels, adult day care, chore, mental health counseling, assisted living, personal care attendant, assistive technology, adult family living, care management, minor home modifications. For more information and to apply, please visit www.ct.gov/dss/chcpe or www.ct.gov/dss/apply (scroll to Medicaid Long-Term Services and Supports).

Katie Beckett Waiver - Serves children and young adults with severe disabilities under age 22. Services include case management and Medicaid coverage aimed at keeping the child or young adult in the community instead of an institutionalized setting. The Home and Community-Based Services that allow the enrollee to remain in the community are provided under the Medicaid state plan. A maximum of 300 slots is funded under legislation. Parents’ income and assets are not factored into the initial eligibility. This offers families of all income levels the opportunity to access services they otherwise may not be able to afford. Waiting list applies. For more information, please contact the DSS Alternate Care Unit at 1-800-445-5394 (toll-free); or 860-424-5582 (Hartford area).

Personal Care Attendant (PCA) Waiver – Provides personal care assistance services included in a care plan to maintain adults with chronic, severe, and permanent disabilities in the community. Without these services, the adult would otherwise require institutionalization. The care plan is developed by a Department social worker, in partnership with the adult. Effective January 1, 2015, the plans are developed with the consumer by an Access Agency care manager. Adults must be age 18-64 to apply, must have significant need for hands on assistance with at least two activities of daily living (eating, bathing, dressing, transferring, toileting), must lack family and community supports to meet the need, and must meet all technical, procedural and financial requirements of the Medicaid program. Medicaid for Employees with Disabilities is an option. Eligible adults must be able to direct their own care and supervise private household employees, or have a Conservator to do so. An adult deemed eligible for the PCA Waiver is
eligible for all Medicaid-covered services. A waiting list applies. The first step in applying is to fill out and return a PCA Waiver Request Form. To download a copy of the form, please click here: www.ct.gov/dss/lib/dss/pdfs/W-982.pdf.

**Acquired Brain Injury (ABI) Waivers** – There are two ABI Waiver programs, known as ABI Waiver I and ABI Waiver II. Both employ the principles of person-centered planning to provide a range of non-medical, home and community-based services, to help maintain adults who have an acquired brain injury (not a developmental or degenerative disorder), in the community. Without these services, the adult would otherwise require placement in institutional settings. Adults must be age 18-64 to apply, must be able to participate in the development of a service plan in partnership with a Department social worker, or have a Conservator to do so, and must meet all technical, procedural and financial requirements of the Medicaid program. Medicaid for Employees with Disabilities is an option. An adult deemed eligible for the ABI Waiver is eligible for all Medicaid-covered services. A waiting list applies. The first step in applying is to fill out and return an ABI Waiver Request Form. To download a copy of the form, please click here: www.ct.gov/dss/lib/dss/pdfs/w1130ABIRequestForm.pdf. Please note that the correct address to send the form to is DSS, Social Work Services, 55 Farmington Avenue, Hartford, CT 06105.

**Department of Developmental Disabilities (DDS) Waivers**

**Comprehensive Waiver** - Provides services for participants with intellectual and/or developmental disabilities that have significant physical, behavioral or medical support needs. Provides adult day health, community companion homes/community living arrangements, group day supports, live-in caregiver, respite, supported employment, independent support broker, adult companion, assisted living, behavioral support, continuous residential supports, environmental modifications, health care coordination, individual goods and services, individualized day supports, individualized home supports, interpreter, nutrition, parenting support, personal emergency response systems, personal support, senior supports, specialized medical equipment and supplies, transportation and vehicle modifications.

**Individual and Family Supports Waiver** - Designed to support individuals who live in their own homes or in their family homes and need less extensive supports than individuals on the Comprehensive Waiver. Provides adult day health, community companion homes (formerly community training homes), group day supports, individual supported employment (formerly
supported employment), live-in companion, prevocational services, respite, independent support broker, behavioral support, companion supports (formerly adult companion), continuous residential supports, environmental mods, group supported employment (formerly supported employment), health care coordination, individualized day supports, individualized home supports, individually directed goods and services, interpreter, nutrition, parenting support, personal emergency response systems, personal support, senior supports, specialized medical equipment and supplies, transportation and vehicle modifications.

**Employment and Day Supports Waiver** - Targets young adults transitioning from school to work with similar services as the other DDS waivers. Provides adult day health, community based day support options, respite, supported employment, independent support broker, behavioral support, individual goods and services, individualized day support, interpreter, specialized medical equipment and supplies and transportation.

**Early Childhood Autism Waiver** - Serves three- and four-year-olds with autism. Services provided are an ABA-certified clinician and a life skills coach.

**Autism Waiver** - Serves individuals ages three and older with an IQ of greater than 70. Services are provided in the person’s own home or family home. Provides community companion homes, live-in companion, respite, assistive technology, clinical behavioral support, community mentor, individuals good and services, interpreter, job coaching, life skills coach, non-medical transportation, personal emergency response systems, social skills group and a specialized driving assessment for individuals.

For more information about DDS waivers, please visit:  

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**Department of Mental Health and Addiction Services (DMHAS) Waiver**

Serves persons with serious mental illness who otherwise require nursing facility level of care with the goal of keeping the person in the community rather than a nursing home. Waiver services complement and/or supplement services available to participants through the Medicaid State Plan and other federal, state and local public programs, as well as natural supports that families and communities provide.
For more information about the DMHAS waiver, please visit:

**Medicaid Waiver Financial Eligibility**

*Income*

All of the Medicaid waivers have a gross income limit of 300% of the base Supplemental Security Income (SSI) rate. The 300% amount of SSI, effective January 1, 2015, is $2,199 a month for a single individual. This figure is a gross income-eligibility test. No adjustment to income is allowed. If gross income is less than the limit, the requirement is met. If income exceeds the limit, the client is ineligible for a Medicaid waiver.

*Assets*

Medicaid waivers have two asset limits, dependent on the age and disability status of the applicant. If the client has eligibility based on elder status (over 65), disability (age 18 - 64), or blindness, the asset limit is $1,600. If the client is a child (under 18), the asset limit of $1,000 is used. Only the recipient’s assets are considered. Clients with excess assets are ineligible for services until the month that assets are reduced to within the asset limit.

*Assets and the Community Spouse*

The spouse of a client approved for a Medicaid waiver program becomes what is called the Medicare Catastrophic Care Act (MCCA) Community Spouse. As part of the initial eligibility determination, any assets held either individually or jointly are deemed to be available using the criteria below. Once eligibility is established for the institutionalized (waiver) spouse, the deeming ceases. The MCCA Community Spouse is allowed half of all assets, subject to a minimum and maximum. For 2014, the minimum amount protected for the community spouse was $23,448 and the maximum is $117,240. These amounts increase to $23,844 and $119,220 for 2015.

[updated 1-6-15, CT DSS]