

*Understanding the Connecticut
DDS Home and Community
Based Services Waivers:*

A Guidebook
for Consumers
and Their
Families



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Governor Dannel P. Malloy
Commissioner Terrence W. Macy, Ph.D.
Deputy Commissioner Joseph W. Drexler, Esq.



DDS

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Acknowledgements

The Department of Developmental Services (DDS) developed this guidebook to explain the department's new Medicaid Waiver System to the individuals and families we support. This guide introduces some very complex information in a format that is easy to understand. We hope that families will use this guide to assist their family members to make informed decisions about the supports and services they receive.

We would like to thank the following individuals for their assistance in developing this guide. Their assistance was invaluable.

CONSUMERS:

Chavis Chappell, Carol Grabbe, Varian Salters, and Jossie Torres

FAMILY MEMBERS: April Dipollina, Harold Hutchinson, and Jennifer Carroll

DDS STAFF: John Baker, Pat Berdnick, Charlan Corlies, Terry Cote, Kathryn duPree, Kathleen Egan, Lorraine Gendron, Sheryl Kemp, Beth McArthur, Greg McMahan, Beth Aura Miller, Siobhan Morgan, Laura Nuss, Mickey Verno, James Welsh, and Robin Wood

OTHER CONTRIBUTORS: Luci Gardner, Gardner Group Graphic Design, LLC; Karen Lewis, Individual and Family Support Intern; Tony Records, Tony Records and Associates Inc.; Gary Smith, Human Services Research Institute; and Lynn Warner, ARC CT

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Hello!

I am pleased to share this guide entitled, ***Understanding the Connecticut DDS Home and Community Based Services Waivers: A Guidebook for Consumers and their Families.*** This guide is designed to help you better understand the services and supports that can be funded through the **Medicaid Home and Community Based Services (HCBS) Waivers**. It provides information that will help you to access and maintain needed services and supports.

The department is committed to helping people with intellectual disabilities live **full, satisfying, and safe** lives in their communities. We understand how important it is for you to be able to **choose how you want to live your life**. DDS has developed systems that will offer you more **choice and control** over the services and supports you receive from the department.



You may read through the entire guide or just review those sections that contain the information you are most interested in. And, always remember to **contact your DDS case manager** if you have any questions.

Terrence W. Macy, Ph.D., Commissioner

CT DEPARTMENT OF DEVELOPMENTAL SERVICES

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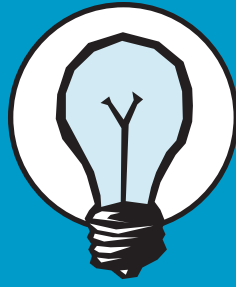
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SECTION 1

Introduction and Background Information on DDS and Medicaid HCBS Waivers

*This section of the guide provides you with
important background information about*

Medicaid HCBS Waivers

It also provides a description of the

Our Foundation of Beliefs

*that guide the design and delivery of
all services provided at DDS.*

And the

Basic Service Elements

that can be found in all waiver services.

Medicaid HCBS Waivers

In order to expand options for supports and services, Connecticut operates three **Medicaid HCBS Waivers**. These waivers are specifically designed to assist individuals with intellectual disabilities. By participating in these Medicaid Waiver programs, the State and DDS are eligible for reimbursement from the federal government for about 50% of the cost for services. This allows DDS to provide more services to more people who are in need of support.

Medicaid is a federal program originally designed to provide medical care and institutional services for people with disabilities. It has a number of rules that restrict how services can be delivered. The HCBS Waivers are arrangements that DDS has with the Medicaid Program (federal government) to have some of the Medicaid rules “waived” so that you can have more choice about how and where you receive services. For most of the services DDS provides, State statute requires people to enroll in a waiver so the State can get the federal reimbursement for those services. More information about this is provided in Section 2 of this guide.

DDS operates three HCBS Waivers, the **Comprehensive Waiver**, the **Individual and Family Support Waiver**, and, **Employment and Day Supports Waiver**. The services provided under each waiver are similar, but there are some differences.

The **COMPREHENSIVE WAIVER** is used to provide services to individuals who live in licensed **Community Living Arrangements (CLA)**, **Community Companion Homes (CCH)** or in **Assisted Living Facilities**. It can also be used to provide services to individuals who live in their own homes or in their family homes and who are in need of a **comprehensive level of supports**, usually because of significant physical, behavioral or medical support needs.

The **INDIVIDUAL AND FAMILY SUPPORT WAIVER** is designed to support individuals who live in their **own homes**, in their **family homes** and who need **less extensive supports**.

The **EMPLOYMENT AND DAY SUPPORTS WAIVER** is designed to support **individuals who live with family or in their own homes and have a strong natural support system**. This includes children under the age of 21 with complex medical needs who would otherwise require institutional placement and individuals over the age of 18 who require career development, supported employment or community based day supports, respite, and/or behavioral supports to remain in their own or their family home.

Our Foundation of Beliefs

The design of **DDS's Medicaid HCBS Waivers** is based upon a foundation of beliefs that have evolved from the DDS mission, Self Determination and Employment First principles, and the HCBS Waiver Assurances.

EASY ACCESS

We want you to be able to find and get the supports you need in as easy a manner as possible. This guide will help you understand what supports are available and how to get the services you need.

RELATIONSHIPS

We want you to receive the supports that you and your planning team members say you like and need and which help you develop the kinds of relationships you may require to make progress toward achieving your dreams.

CREATIVE, FLEXIBLE, EFFECTIVE SUPPORTS

We want you to receive supports that are creative and effective so that your individual needs are met in the best and most cost efficient way possible. We also want to provide services that are flexible so that supports can change as your needs change.

CHOICE & CONTROL

Most of all, we want you to feel that you are a respected, valued, and an equal partner in the design and delivery of the supports that are provided to you. We aim to create fair and equitable systems, which support your role as an effective decision-maker.

HEALTH & SAFETY

It is DDS's responsibility to ensure that all of the waiver supports you receive help to keep you healthy and safe, while also respecting your desire for choice and control. To help maintain this balance, we offer a high quality system of supports. These supports will minimize health and safety risks while allowing you to make informed choices, try new experiences, take reasonable risks, and assume new challenges in your life.

EMPLOYMENT FIRST

CT DDS has now embraced the growing national belief that community based employment should be the first priority for all people. This conviction has been supported and promoted by Self Advocates who remind all of us that real work for real pay makes sense for everyone. Real work for real pay is also a natural extension of our belief that people with disabilities have the right to control their lives and have authority over the resources that support them. Working and earning a living wage supports these fundamental principles of self-determination.

Basic Service Elements

Some **common service elements** must be included in all waiver supports and services provided by DDS. These common service elements are described below:

CASE MANAGEMENT

All individuals receiving waiver services are assigned a DDS case manager. Your case manager is there to help you plan for and get the services and supports you need.

Your case manager can assist you in the following ways:

- **HELP YOU** find out about your choices and options for services and supports.
- **HELP YOU TO DEVELOP** the employment supports you need to get real work for real pay.
- **HELP YOU** with planning and preparing your budget.
- **HELP YOU** arrange your supports and services.
- **HELPS** with necessary documentation.
- Once you are getting services, **CHECK TO** make sure they are meeting your needs and that you are happy with them.
- **HELP YOU** to make changes to your plan and budget if your situation changes.
- **HELP YOU** by advocating on your behalf if you need it.

INDIVIDUAL PLANNING

All individuals who receive waiver services and supports funded by DDS have an **Individual Plan (IP)**. Your IP includes important information about you, where you live and work, the outcomes you want, and the steps you and your team need to take to get there. Your plan also outlines your support needs. You and your **Planning and Support Team or Circle of Support** help create your plan. Usually, the people on your planning team or circle include you, your guardian (if you have one), your DDS case manager, and other people whom you choose. This can include family members or friends; staff from home, work, or day programs; co-workers; therapists or nurses; or anyone else you like and whose opinion you value.

DDS has an IP format that must be used to document your plan for supports and services. Your case manager can provide you with a copy of the IP forms or you may find the forms on the DDS Website at www.ct.gov/dds.

It is important that you stay in frequent contact with your case manager, especially if your needs change or you think you may require different supports in the future.

INDIVIDUAL ALLOCATIONS

All individuals receiving waiver supports have individual allocations. Your individual budget is the amount of money DDS allocates to you for supports for a year. The amount of money is based on the results of your Level of Need Assessment and your support needs outlined in your plan.

Your case manager will work with you to craft a plan for supports that includes a combination of **natural supports from family and friends, co-workers, community supports, Medicaid supports, HCBS Waiver supports, and DDS state-funded supports**. All five types of support are important and will be woven together in a plan that can best meet your needs and reflect your personal preferences.

more choices



“Things at DDS can be very confusing. I like when people break things down and use easy to understand words.”

CAROL GRABBE, Consumer

DOCUMENTATION

Nobody likes paperwork, but unfortunately, documentation is required in order to access and use state and federal funds. DDS must assure that HCBS Waiver funds are used appropriately and in a fashion that meets federal and state requirements. There are different documentation requirements depending upon the types of services you select and the methods you use for managing them. You can always ask your case manager to assist you with any paperwork that you are required to complete.

QUALITY ASSURANCE AND IMPROVEMENT

The department wants to make sure that you are satisfied with the services and supports that you receive, and that those supports are helping you move toward the outcomes that are in your Individual Plan. If you are receiving waiver supports, you will be expected to participate in some or all of the following quality monitoring processes: Consumer Satisfaction Interviews and Surveys, Case Manager Reviews, Regional Quality Reviews, Quality Service Reviews. All of these review processes help DDS to ensure that the services we provide through the waiver help you to lead a **full, satisfying, and safe life with the supports and assets you need to succeed**.

A Personal Story



Haley: Living the Life She Chooses

IN THE PAST, Haley spent most of her life in institution and group home placements in Connecticut. Diagnosed with severe mental retardation and pervasive developmental disorder, Haley was not seen as able to function outside of the care that was provided to her in those settings. But this was not what Haley wanted. The staff changes and lack of control over events that happened in her group home environment often made her anxious and upset.

Now, with the new supports that DDS has to offer, Haley has achieved a self-determined life that brings her comfort and satisfaction.

HALEY'S CURRENT LIFE

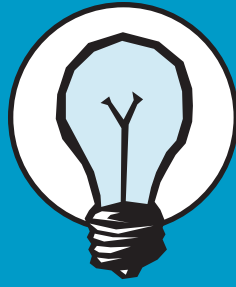
Haley lives in her own condominium with a separate room and bathroom facilities for her staff. She has a small sitting room that is only for her personal use, and she uses it when she is feeling upset or unwell. Her brother has helped with some of the major modifications to the bathroom to accommodate her needs. Haley is proud of her home.

Haley has staff to help her with personal care, and a teacher who comes to her home to help her practice her communication skills on her computer. Haley's mother helps with the hiring process, but Haley is the one who has the final say in who she wants to hire for her personal supports. She now has good relationships with all her staff and trusts them to help when she goes out in the community.

The supports Haley receives are designed and delivered with the help of her dedicated family, a chosen circle of support, community supports, and waiver supports from the DDS Medicaid HCBS Waiver program.

These supports allow her choice and control and are creative, flexible, and effective. They support the important relationships in Haley's life and help ensure that she is healthy and safe.

Haley and her mother both say they are "never looking back"!



SECTION 2

How to Access and Receive Waiver Supports

This section of the guide provides an explanation of

DDS Eligibility

Medicaid HCBS Waiver Eligibility

and DDS HelpLine

is explained in this section of the guide.

It also explains how your

Priority Checklist and the

Level of Need Assessment

is determined and how the

Planning and Resource

Allocation Process

decides what resources are allocated to you.

DDS Eligibility

In order to receive waiver services, you must first be eligible to receive services from DDS.

To be eligible to receive services from DDS, a person must:

- **BE A RESIDENT OF CONNECTICUT**
- **HAVE A DIAGNOSIS OF MENTAL RETARDATION** as defined in Connecticut General Statutes 1-1g (see Eligibility Fact Sheet: www.ct.gov/dds/eligibility OR
- **HAVE A MEDICAL DIAGNOSIS OF PRADER-WILLI SYNDROME.** Prader-Willi Syndrome is a neurobehavioral genetic disorder. A physician, using medically appropriate criteria, must make the diagnosis.

Once you are found to be eligible for DDS services, the department will assign you to one of the **DDS Regions**, based on where you live. The region will then assign a case manager to help you to identify the services that you need and review what supports are currently available.

If the department cannot provide you with case management or other DDS services right away, you will be placed on a list for case management, and if needed, on the Waiting List for other DDS services.



DDS HelpLine

Each of the DDS Regions have established a **HelpLine** to assist families who do not have a case manager to help access services. **HelpLine** staff will assist you to apply for DDS Family Support Services or refer you to appropriate community resources and services.

NORTH REGION

HelpLine 1-877-437-4577

email: dds.nr.ifshelpline@ct.gov

SOUTH REGION

HelpLine 1-877-437-4567

email: dds.sr.ifshelpline@ct.gov

WEST REGION

HelpLine 1-877-491-2720

email: dds.wr.ifshelpline@ct.gov

DDS HelpLine

A **DDS HelpLine** was established statewide to provide assistance to individuals and families who do not have an assigned DDS Case Manager.

This applies to individuals who:

- Are eligible for services from the Department of Developmental Services (DDS)
- Do not have a Case Manager because they are not on fee for service Medicaid.

They may have Husky, other managed care or private insurance only.

How Does the HelpLine Work?

Each region has established regional toll free numbers to screen calls and answer questions from families without case management services. Callers will be asked for specific information to forward it to the appropriate DDS employee to assist them. If callers are unable to reach someone directly when they call the HelpLine, when leaving a message, please make certain that the reason for the call is indicated, as well as the caller's name, phone number and the name of the individual you are calling about. This will assist in having calls promptly returned as soon as possible.

Please understand that due to confidentiality, DDS cannot speak to callers about individuals, nor verify that they are eligible for services from the Department, unless they are a guardian for the individual, or an authorization to release information to the caller is on file with us.

Eligibility for DDS Services

TO APPLY FOR SERVICES from DDS, call our Statewide Eligibility Unit Toll Free at **1-866-433-8192**.

DDS HELPLINE NUMBER

Exclusively for individuals eligible for DDS services who do not have assigned DDS Case Managers as they are not enrolled in fee for service Medicaid.

DDS NORTH REGION

Location: East Hartford Office
Phone: 1-877-437-4577

DDS SOUTH REGION

Location: New Haven Office
Phone: 1-877-437-4567

DDS WEST REGION

Location: Cheshire Office
Phone: 1-877-491-2720

Medicaid HCBS Waiver Eligibility

If you are eligible to apply for one of the HCBS Medicaid Waivers, **DDS will help you through the application process.** Being enrolled in one of the waivers will help you create a package of services that is right for you.

To be eligible for any of the waivers, you must:

- **ALREADY BE ELIGIBLE FOR MEDICAID**, or be determined to qualify for Medicaid
- **HAVE INCOME** and assets no greater than the guidelines set by the Department of Social Services
- **HAVE NEEDS** that can be met through a waiver so that you do not have to live in an institution (ICF/MR) or Nursing Home to have your support needs met
- **NEED WAIVER SUPPORTS** in addition to the supports that you already have to lead a safe and healthy life in the community. These other supports can include DDS state-funded services, Medicaid state plan services, community/generic services, and natural supports such as your family or friends.

Some people have a lot of questions about applying for Medicaid (Title 19). Your case manager can provide you additional information about **Medicaid Services.**

Remember, it is important that you work with your case manager to apply for Medicaid and enroll in an HCBS Waiver when asked to do so. If you don't, you will not be eligible for the day, employment, in-home, residential, or other HCBS Waiver supports you may need.

If you do not have a case manager, please contact DDS HelpLine for any questions you may have about Medicaid.

more choices



*"I may not understand everything about the waivers, but it seems to me that the new waivers mean we have **more choices** and I'm all for that!"* CHAVIS CHAPPELL, Consumer

Priority Checklist and the Level of Need Assessment

After you have been determined eligible for DDS services and a decision has been made, you will be assigned a case manager. The case manager will assist you. If not assigned a case manager, the HelpLine will support you.

If you have a need for in-home, residential, day or employment services and supports, your case manager will help you complete a **Request for Service**. In addition, the case manager will complete a **Priority Checklist** that helps to determine how soon you will need services. The Priority Checklist helps determine if your needs are an emergency that should be addressed as soon as possible, a priority that should be met within a year or so, or is a need that can be addressed at a later point in time.

Finally, DDS will determine your **Level of Need (LON)** using a process that looks at your individual level of

independence, the supports you already have, what supports you need, and other important aspects of your life. The LON process helps the department to give people their fair and equal share of the resources we have. This information is used to **plan ahead** for the amount of funds you or your family may be eligible for if you are offered an opportunity to apply for a DDS waiver.

Your case manager will complete the LON Assessment with information you and others provide to determine what your funding needs would be based on today's circumstances. This will be updated every year, or whenever your needs may have changed because of some change in your life.

The case manager then gives the **Request for Service**, the **Priority Checklist**, and the **Level of Need Assessment** to the **Planning and Resource Allocation Team (PRAT)**.

The Planning and Resource Allocation Team (PRAT)

Each DDS Region has a PRAT that will review your information and assign a priority to your request for services. Your case manager will help you complete the forms that you need and send them to the PRAT.

All of the necessary resources may not be available right away, so the PRAT may use the information to place you on the Waiting List. When resources are available, individuals in emergency situations will be considered first.

The Planning and Resource Allocation Team, CONTINUED

After that, resources will be allocated based on the priority level of people on the Waiting List.

For example, a person who applies for DDS services with immediate health and safety needs and does not have family or other community supports that can help meet those needs would qualify as an “emergency.” The PRAT would give this situation the highest priority for making resources available, when possible.

When you and your case manager are notified that resources are available, your assigned LON will determine the initial range of funding assigned or the type of service available for you. If those resources are expected to meet your projected needs for supports, you will be asked to enroll in one of the DDS HCBS Waivers at the same time. Enrollment in a DDS waiver requires that you apply for and be found eligible for Medicaid if you are not already. Your case manager can explain what this involves.

If you do not want to be enrolled in a waiver, you will not be able to get the services and/or funding set aside for you. Then you would only be eligible for state funds, which are **VERY LIMITED** and are used mostly to obtain respite and other family supports. That is why DDS will make every effort to help you become eligible for waiver enrollment.

The amount of resources planned for you can be adjusted if there are other important factors not reflected by the LON process. If you request services with costs exceeding your funding ranges, the PRAT will review your request and send it on to regional and statewide Utilization Review Committees, if needed.

All decisions are made in writing and include an opportunity to appeal. Information about appeal processes can be found under Rights and Responsibilities in Section 4 of this guide.

Your case manager can help you complete the required forms . . .

A Personal Story



John: Moving Ahead

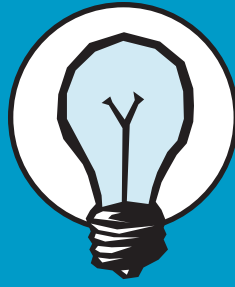
IN THE RECENT PAST: John was at a place in his life where he was anticipating many changes. He was looking forward to the day he would graduate from high school, his parents were planning to retire and move to a smaller home, and his older brother was preparing to go to college in another state. Throughout his life, John's family was able to provide him with wonderful support for his personal care and emotional needs. As he grew and moved toward adulthood, John and his mom and dad knew they had to find new ways to meet his needs.

WITH HELP: from the DDS transition staff, John was able to establish his eligibility for DDS services. With the help of his newly assigned case manager, John completed all the paperwork needed so that the Planning Resource Allocation Team could assign him a Level of Need and a priority rating. Due to his health needs and the age and health needs of his parents, John was allocated funding to purchase Individual and Family Support Waiver services.

JOHN'S CURRENT LIFE:

John and his parents used the funding to hire an agency to provide vocational supports to help John get the kind of job that he wanted. John has always loved anything to do with cars. He found a job working at a local garage two mornings a week with the assistance of a newly hired staff person. John and his parents also used their funding to hire their own staff to assist John in maintaining his life with his family.

These services allowed John to learn new skills, earn an income and become a member of his community.



SECTION 3

Choosing the Waiver Services that are Right for You

*This section of the guide provides
information needed when*

Choosing Your Waiver Supports

It lists the

Waiver Service Options

and explains the different

Hiring Choices

that you will need to make.

It also explains the

Waiver Staff Qualifications

*that all individuals who provide waiver services must meet,
in order to be able to provide supports to you.*

Choosing Your Waiver Supports

Once you've become eligible for waiver services and have been allocated an individual budget range based on your LON, you will need to **think about the type of services you want** to purchase to accomplish the outcomes you have identified in your plan.

This section of the guide lists the supports and services that are available under the **Individual and Family Support Waiver** and the **Comprehensive Waiver** and **Employment and Day Supports Waiver**.

Appendix A of this guide provides a more complete description of the different types of waiver services. Your case manager will help you to identify the waiver services that best meet the needs that are listed in your plan.

Remember, once approved by the PRAT, your **Individual Budget** will pay for these supports and services. It will be important to put together a support package that falls within your allocated budget. *Some types of supports and categories of service have limitations about how you can use them, so make sure you read the descriptions carefully and check with your case manager before making any commitments.*

Which waiver you are eligible for will depend on where you live and/or how much support you may need.



For More Information GO to the DDS Website at:

*<http://www.ct.gov/dds>
and SELECT*

Waiver Information *and then SELECT*

The CT Department of Developmental Services HCBS Waiver Manual

This manual provides detailed information on the service categories listed below. It also provides information on the funding, monitoring, and quality approval process. It also includes specific information on limitations for use of the funds.

Waiver Service Options

The following services are available under all three DDS Waivers:

- Supported Employment Service
- Community-Based Day Support Options
- Individualized Day Supports
- Transportation
- Respite
- Independent Support Broker
- Behavior Support Services
- Interpreter Services
- Specialized Medical/Adaptive Equipment
- Individual Goods and Services are only available to individuals/families who self-direct (hire/manage staff) their services

As you can see, a very extensive set of services and supports is available through these two waivers. It is important to note, however, that there are a variety of special limitations and restrictions on the use of funds for the services and supports offered in the different waivers. ***Therefore, it is very important to discuss any proposed plans with your case manager.***

The following additional services are also available in the Individual and Family Support Waiver and in the Comprehensive Waiver:

- Nutrition Services
- Personal Support
- Adult Companion
- Individual Home Supports
- Personal Emergency System (PERS)
- Environmental Adaptation
- Vehicle Adaptation
- Live-In Caregiver

Specific services that are available in just one waiver include the following:

INDIVIDUAL/FAMILY WAIVER

- Family Training
- Healthcare Coordinator

COMPREHENSIVE WAIVER

- CLA (Group Homes)
- CCM (Community Companion Homes)
- Assisted Living

EMPLOYMENT AND DAY SERVICES WAIVER

- Adult Day Health

Hiring Choices

Once you have identified the services that will best meet your needs, you and your family can **choose how you want to manage those services.**

In all cases, you can choose any qualified provider you want to deliver services and supports. Your case manager will assist you to find **qualified providers** in your area. DDS has established **rates for services**. A rate for service is the amount the provider has agreed to accept as payment for the service. This makes it easier for you to plan and access the services you need. Depending on the option you select to manage your supports, you may also be able to negotiate a lower rate of payment for a service or decide how much to pay a staff person you hire directly.

You can choose from among a number of different options, including:

- **SELF-DIRECTION.** If you select this option, you become the employer of the people you choose to hire to provide supports to you. As the employer, you are responsible for the training, supervision, and management of the people you hire. This option **gives you the most control** over your supports but also the **most responsibility**. You are able to choose your own staff and have direct control over who works with you, their schedules, and their routines. In this model, you also decide how much to pay your staff and what benefits they receive. If you choose this option, you may withhold your allocation you will have a limited amount of State funds to purchase non-waivered supports.
- **AGENCY WITH CHOICE.** Agencies with choice are providers who agree to **hire the individual you choose** to provide services to you. This individual becomes an employee of the vendor agency and the agency agrees to help you train and manage that staff. The agency may also agree to negotiate the rate to be paid for the service or the wage to be paid to the staff person you want to hire.
- **PROVIDER.** A provider is a traditional agency that is the **employer of the staff that will provide services** to you. DDS will use the funds that are allocated to you in your individual budget to pay the providers at the established rates for service. The provider is responsible for hiring, training, and managing the staff that support you.
- **OR,** you can use a **combination** of the above approaches to meet your individual needs.

Additional Supports

DDS has developed a variety of support systems that can **help you to manage the resources** you receive. These support systems are described below.

FISCAL INTERMEDIARY

If you hire your own staff, you will be required to use a **Fiscal Intermediary (FI)**. This service helps both you and DDS to manage individual budgets and helps people who choose to hire their own staff to manage the financial responsibilities of being an employer. This service is **funded by DDS and will not cost you anything** from your individual budget.

You can contact your case manager for more information about the Fiscal Intermediaries.

DDS CASE MANAGEMENT AND SUPPORT BROKERS

If you choose to hire your own staff, you can request the services of a **DDS Support Broker**. A support broker is a case manager who has a smaller size caseload, so that he or she has the time to provide you with both case management services and additional assistance needed to hire and manage your supports.

INDIVIDUAL SUPPORT BROKER

You also have the option to use funds from your individual budget to hire someone you choose to manage your resources and to help you with the hiring, training, and management of the people you hire. This can be a person that you hire directly, or a service you purchase from a qualified vendor. If you choose this option, you will continue to receive services from your assigned DDS case manager to make sure your Individual Plan is being implemented, and that you are satisfied with the supports that you are receiving.

more choices



"I never dreamed I could hire and fire my own staff, but I did it! And I'm so happy and proud of myself for doing this"

LAURA KATE SADLER, Consumer

Waiver Staff Qualifications

DDS has established standard requirements to make sure that any staff member that provides waiver services to you is able to provide you with safe, quality services. Whether you choose a traditional provider, an agency with choice, hire your own staff, or a combination of the above, any individual providing waiver services to you must meet established waiver service staff qualifications.

Understanding Staff Qualifications . . .

<i>Method</i>	<i>Staff Qualifications and Requirements</i>
PROVIDERS AND AGENCIES WITH CHOICE	<p>Only providers and agencies with choice that are on the DDS qualified provider list can provide waiver services to you. A qualified provider is a private agency or organization that has applied for and met criteria that DDS has established to assure standards of safety and quality service can be met.</p> <p>Your case manager/broker can provide you with a list of the DDS Qualified Providers and can help you to contact one of your choice. This list will also tell you whether a provider is an agency with choice.</p> <p>The specific qualifications that providers and agencies with choice have to meet are determined by the type of waiver service provided and by your Individual Plan. Your case manager or support broker can help you to identify the specific qualifications required for each service category, as outlined in the DDS Waiver Manual.</p>

Waiver Staff Qualifications, CONTINUED

<i>Method</i>	<i>Staff Qualifications and Requirements</i>
HIRING YOUR OWN EMPLOYEES	<p>When you choose to become an employer and hire your own staff, you must ensure that each person that you hire meets the following qualifications.</p> <ul style="list-style-type: none">• Be an adult 18 yrs. of age (16 yrs. for self-directed in-home respite, 21 yrs. for Independent Support Broker and Supported Employment Services).• Complete a Criminal Background Check.• Pass a DDS Registry Check.• Have the ability to communicate effectively with you/your family.• Have the ability to complete record keeping as you (the employer) require.• Demonstrate a good understanding of DDS policies and procedures on abuse/neglect; incident reporting; human rights; confidentiality; handling fire and other emergencies; prevention of sexual abuse; knowledge of approved and prohibited physical management techniques.• Complete required computer based training College of Direct Support (CDS) online training.• Demonstrate competence in their role necessary to safely support you, as outlined in your Individual Plan.

If you choose to hire your own staff, your fiscal intermediary and your case manager can assist you to fulfill employee qualification and training requirements. Your case manager can also provide you with training materials to provide to your staff. There are required forms and paperwork that needs to be completed by people who directly hire their supports.

A Personal Story



Angie: Making Her Own Choices

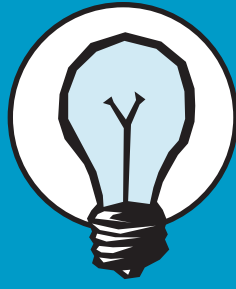
IN THE PAST: My name is Angie. Before I graduated, my case manager placed me with an agency, which I didn't like very much. The people at that agency didn't listen to me and I didn't get to do the kinds of things I like to do. I had to go to a day program where I had to do things I didn't like to do, and spend time with people who I didn't like. Then DDS gave me the opportunity to purchase supports in a new way. I was then able to create my very own day supports.

ANGIE'S CURRENT LIFE:

I now spend my day working with horses and learning how to handle them. I have a staff person, Wendy, who drives me there and back. My budget pays Wendy to provide Individual Home Supports and Transportation. I have an instructor there who is also the owner of the farm. He teaches me to work with the horses and lets me make my own mistakes. He stands beside me so I won't get hurt when the horses are around. I learn new things every week. He is a nice guy and he treats all of the horses like his own children.

When I am not at the farm, the rest of my time is occupied with other things. I take computer courses at Naugatuck Valley Community Technical College, I coach The Unified Team, I am a Special Olympics athlete, and I sit on DDS's Advisory Council. I have another staff, Stacey, who helps me with these activities. I use my Waiver budget funds to pay Stacey for her Adult Companion Services.

I use my own funds to pay for my recreation costs, to pay for my computer classes, and to pay for any other personal expenses that I may have.



SECTION 4

Assuring the Quality of Waiver Services

This section of the guide provides information on

Consumer Satisfaction

It tells what you can do to enhance

Your Individual Plan

and how

DDS Policies, Procedures and Administrative Processes

help to ensure quality of your waiver services.

It also explains how the

DDS Quality Service Review

process works and how you can use your

Rights & Responsibilities

to obtain and keep the services that best meet your needs.

Consumer Satisfaction

It is important to regularly think about the quality of the services you are receiving and if you are satisfied with them.

You are the expert in what you need and what you expect from your services!

For you, quality might be:

- Your transportation shows up on time.
- The people who are paid to support you in your home should treat you with respect.
- Your case manager or support broker is available to help you understand the waiver application process.

Think about other examples of quality and what it means to you:

- _____

- _____

- _____

- _____

- _____

There are a variety of ways that you can let people know whether or not you are satisfied with the supports and services you receive:

Provide Feedback

It is important that you provide feedback to the people who support you on an ongoing basis. If you are hiring your own supports, you will want to plan to do regular staff evaluations (every six months or so.) This can be a formal process, or can be done in a more informal manner. You can ask your case manager/support broker to help you do this. If you purchase services from a traditional provider, or from an Agency With Choice, you can also check to see if they will let you participate in the staff evaluation process for the person who provides services to you.

Consumer Satisfaction, CONTINUED

Case Management Quality Activities

You may be asked how you feel about the quality of your services in a number of different ways. Your case manager will ask you some quality questions at least once a year, and for some people more often than that. Your case manager will also observe the people who are providing your supports in each of your service settings and will complete a safety review, if you live in your own home or apartment.

Regional and Statewide Quality Activities

You may also be interviewed by regional or state Quality Service Review (QSR) team members from DDS. They may also observe the people who are providing your supports in each of your service settings. Whether or not this happens will depend upon the type of supports you receive and whether you are selected in our quality service review program sample selection process. Your case manager will provide you with detailed information ahead of time, if you are selected to participate in one of our regional or state quality assurance activities.

If you are a person who needs help managing your behavior so that you do not hurt yourself or others, DDS coordinates two committees that can help ensure that you have effective quality supports. The **Program Review Committee**, or PRC, can review any behavior program that may restrict your rights or include medication that might be harmful to you unless used in the right way. A **Human Rights Committee**, or HRC, is also in each region. This committee is made up of individual, family, provider, and community members who make sure that DDS or providers do not restrict any of your rights as a citizen unless absolutely necessary to keep you or others safe.

more choices



"I let my support staff know what I like and what I don't like. I know what works best for me. I like being in charge of making sure I get good quality services!"

VARIAN SALTERS, Consumer

Your Individual Plan

Our **Quality Management** system begins with a person-centered, individual planning process.

You can help ensure that you have good quality supports and services by making sure your **Individual Plan (IP)** includes all of the ideas and components of a good quality plan that are described below:

YOUR PARTICIPATION IN THE PLAN

A good quality IP will identify all of the supports you need to ensure that you can be an active, effective participant in the planning process. This is important so that over time you can improve your ability to communicate your needs and wants and increase your ability to make sure your individual planning meetings happen the way you want them to happen.

PROFILE INFORMATION

The profile section of the IP describes who you are and what is most important to you. Examples of information that can be included in the profile section of a plan are things like: important information about your past; your accomplishments, strengths, and preferences; descriptions of your typical

day, school, work and leisure routines; important relationships; health and wellness information; information about choice and decision-making skills; financial information; and any other information that you want known about yourself. This section of the plan should be very thorough, so that people will understand what is most important to know about you.

FUTURE VISION INFORMATION

The future vision section of the IP includes a description about your hopes and dreams for the future. This section of the plan helps others to learn about what you want to accomplish in one to three years and will help you to prioritize what you want to accomplish in the next year. To help you create a vision of the future that meets your deepest dreams and desires, your planning team members should have high expectations for you and should help you to have new experiences, take reasonable risks, and learn about new opportunities.

“Quality begins with a good plan . . .”

Your Individual Plan, CONTINUED

ASSESSMENTS (CURRENT & NEEDED)

The assessment section of the IP includes current assessment information and identifies additional assessments needed to help you attain what you want to achieve. A good assessment report provides detailed information about your needs and how to address those needs in a way that helps you understand how implementation of the recommendations in the report will help you move closer toward attaining your dreams. Good assessments are timely, thorough, easy to understand, and are shared and explained to you prior to your planning meeting. The assessment section of the individual plan includes a health and safety screening. Your case manager can provide you with a copy of this tool.

THE ACTION PLAN

A quality action plan includes information about what you want to achieve; it identifies needs to be addressed; it provides a list of the action steps that need to be taken to address identified needs and to achieve your desired outcomes or goals; it lists the persons responsible for taking the actions identified; and it tells when the action will be completed. Quality action planning encourages creative thinking and allows ample time for brainstorming. Quality action plans also make sure that

the actions taken on your behalf balance what is important to you (desired outcomes) and what is important for you (addressing areas of need). Quality action plans also include actions that you volunteer to take responsibility for. This will help you to feel ownership and equality in the planning process.

SUMMARY OF INDIVIDUALS/AGENCIES WHO WILL PROVIDE SUPPORT

This section of the IP lists each type of service identified in your plan, including waiver services. For each service listed, it also identifies who provides the support or service, the amount (hours) of service provided, and how often the service is provided. A quality plan makes a clear connection about how the provision of a waiver service will help you to address your goals or needs.

SUMMARY OF MONITORING AND EVALUATION OF PLAN

This part of the IP describes what team members will do to ensure that the action plan is being implemented as designed and that progress is being made toward meeting your needs and achieving your goals. It also includes a clear description of how often your case manager will contact you about the individual plan.

PLAN DEVELOPMENT AND APPROVAL

Attendance at the planning team meeting must be documented in your plan. The IP must note the names of the people who attended the meeting, the relationship of these individuals to you, and whether or not you approve the plan. It is not necessary for everyone attending the meeting to approve the plan. However, a quality plan will note when a team member disagrees with decisions that have been made. The plan will also list the actions that will be taken to work toward team agreement. There are times when people who could not attend the meeting will want to review then plan. This may also be noted on this form.

INDIVIDUAL, FAMILY, GUARDIAN, OR ADVOCATE INVOLVEMENT IN THE PLAN

DDS wants you, your family members, and guardians to be active members of your individual planning process. Successful plans tell what your team members did to assist you to actively participate and what changes are needed so that your participation is even better in the future. If you do not have very many people involved in your planning process, your plan should also identify ways that you can meet and form relationships with new people who at some point may want to be involved in your planning process.

PERIODIC REVIEW OF THE PLAN

How often a plan needs to be reviewed depends upon the type of services that are being provided to you. If you have a lot of change happening in your life (for example, moving to a new community, serious health problems, or after the loss of an important person in your life), you may need to have your plan reviewed every three months. If you have a very stable life, you may only need to have your plan reviewed every six months. Quality plans are reviewed as often as you and your planning team members feel necessary.

PLAN FOLLOW-UP

Your case manager is responsible for making sure that everyone follows-up with what they are supposed to do in the action plan section of your plan. Follow-up of individual plans can also include activities such as making referrals for services or for additional assessments, reviewing action plan implementation, doing quality checks, and revising the plan as needed. Implementation of quality plans means doing “whatever it takes,” to help your team make sure your needs are addressed.

*A plan designed
just for you . . .*

Important DDS Policies and Procedures

Some **Important Policies and Procedures** that directly impact waiver services that you should know about include the following:

INCIDENT REPORTING FOR PEOPLE WHO LIVE IN THEIR OWN OR FAMILY HOMES

This process requires that you or your support staff report information to your case manager about the following incidents if they happen when staff are with you: severe injuries or death, unexpected hospitalizations, if you are lost or missing and the police have been notified, if a fire started and needed to be put out by the fire department, if you are arrested, if you are a victim of theft or a physical assault, if you are involved in a vehicle accident and have a moderate or severe injury, or if you need to be restrained. DDS will use information about critical incidents to make sure that whatever happened has been taken care of as best as possible, and to see if there are things DDS could do to prevent new incidents in the future. Agencies also must report incidents to DDS if they occur while at a day, employment or residential setting.

UTILIZATION RESOURCE REVIEW

If you need more services than are allowed according to your Level of Need, your services will have to be reviewed by a committee to ensure that this decision is consistent with others who have situations similar to yours. DDS is doing this to make sure that we treat everyone fairly and use DDS funds wisely so more people can get supports.

FAIR HEARING RIGHTS

Everyone who is enrolled in a waiver or wants to enroll in one has the right to appeal decisions DDS makes. That is called, Fair Hearing Rights. DDS will send you official notice if a service is denied or reduced by the Central Office and it will include a form to ask for an appeal. The Department of Social Services (DSS) will hold the hearing and make the final decision. DSS is the Medicaid agency for Connecticut.

You should know about some other processes and paperwork documentation requirements. Application of these will vary depending upon the types of services you select and the methods for managing them.

Quality Service Review

Whether you are using a Traditional Provider, an Agency With Choice, or are hiring your own supports, the department regularly reviews all providers in a formal process called **Quality Service Review**.

Your case manager and the Quality Review Staff will be involved in the quality review for your provider(s).

They will be gathering information in several ways, which may include:

- Interviewing you and your family.
- Interviewing your support staff.
- Observing your support staff while they provide you with supports.
- Looking at documentation of the work your support staff has done (time sheets, daily logs, etc.).
- Conducting a Safety Review.

The **Quality Review Staff** will develop recommendations as part of the service review. These recommendations may include:

QUALITY IMPROVEMENT PLAN.

A plan that is developed with the Provider Agency or Agency With Choice in areas where the services are acceptable but could be made better by doing the things that are outlined in the Quality Improvement Plan.

CORRECTIVE ACTION PLAN.

A plan that is developed if the Provider Agency or Agency With Choice is found to be putting individuals' health or safety

at risk. This plan will tell the provider what the problem is, what they need to do to correct the problem, and when it needs to be done.

EMPLOYER QUALITY ACTION PLAN.

If you employ individuals directly, you may be asked to complete an Employer Quality Action Plan. This plan may include things you can do to improve the services being provided by your employees and/or things that need immediate corrective action. Your case manager or support broker will work with you to help you to respond to a request to complete an Employer Quality Action Plan.

Followup: If corrective actions are required following a Quality Service Review, DDS staff will continue to visit and work with the agency or with you until the identified area of concern is resolved.

If an agency does not resolve the identified area of concern in an acceptable way, the agency might be "de-certified". This means they cannot provide services to you anymore. If this happens, our department has systems in place to help you to get another vendor quickly.

If you, as the employer, do not resolve the identified area of concern in an acceptable way, you might be notified that you can no longer use waiver funds to hire and pay your employees. If this happens, your case manager or support broker will help you to get the supports and services you need from a provider.

Rights and Responsibilities

As someone who is receiving HCBS Waiver Services, you have some **Basic Rights and Responsibilities**.

Your Rights

YOU HAVE THE RIGHT TO:

- Be safe
- Be treated with respect
- Have your service options explained to you in a way you understand
- Express your personal desires
- Privacy
- Be free of physical and mental abuse
- Speak up and complain if you don't like something without consequences
- Be informed if there are changes that affect you
- Appeal a decision about your service options.

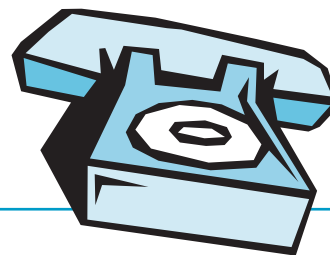
Your Responsibilities

YOU ARE RESPONSIBLE FOR:

- Being actively involved in developing, implementing and evaluating your Individual Plan
- Letting your case manager know if your situation changes (e.g. you moved, or you are no longer eligible for Medicaid, your support needs change)
- Respecting others, as you want to be respected.

Know exactly what you need to do . . .

Make a phone call . . .



If you do not agree with service decisions made by DDS, there are a number of ways you can have a decision reviewed.

If you do not agree, you can:

- **REGIONAL OFFICE**
Call your Regional Office and ask to have a Supervisor or Division Director review your concerns
- **PROGRAMMATIC ADMINISTRATIVE REVIEW**
Request a Programmatic Administrative Review (PAR) by the Regional Director
- **FAIR HEARING REQUEST**
Complete and return a Fair Hearing Request through DSS if one is sent to you when a decision is made about waiver services you wanted
- **INDEPENDENT DDS OMBUDSPERSON**
Contact the Independent DDS Ombudsman at:
(860) 418-6047 (Hartford) (866) 737-0331 (Toll Free)

Your case manager can help you arrange these options if needed. We want decisions to be fair and equitable so talk to someone if you have a dispute with DDS.

A Personal Story



Ben: Maintaining the Life He Chooses

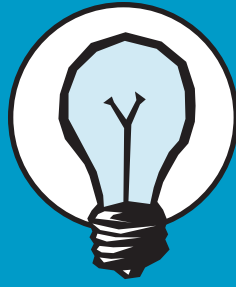
IN THE PAST: Ben and his sister have always lived at home. Both Ben and his older sister have an intellectual delay and have lived in the family home with their mother for over 50 years. This living situation gave everyone in the family much comfort. Sadly, last year Ben's mother developed a sudden illness and died shortly thereafter. Ben's cousins have always been close to his family and wanted to help Ben and his sister, but they live a two-hour drive away and were not able to provide the level of daily support that they both need. Ben (who has more support needs than his sister) was sure that he did not want to move to a group home, away from his sister and with people that he did not know.

BEN'S CURRENT LIFE:

With support from his planning and support team members, which consisted of family, friends, and his DDS case manager/broker, Ben and his sister have been able to move to a single family home closer to their cousins. Their cousins help with maintenance of the home, and life planning, and they have hired a live-in care giver and they receive help with personal care, cooking, upkeep of the house, and recreation.

Now, at age 60, Ben, continues to let people know what he likes and doesn't like and continues to rely on his successful Individual Planning Team and support to help him plan and prepare for his future.

The DDS Quality System Review helps to make sure Ben is safe and healthy in his home and is satisfied with his life and with the supports and services he receives.



APPENDICES

Helpful Resources

Appendix A

Waiver Service Descriptions

Appendix B

*Fact Sheets, Internet Sites
& Other Resources*

Appendix C

Frequently Asked Questions

Appendix D

Frequently Used Acronyms

Appendix A: Waiver Service Descriptions

Waiver Services

<i>Type of Support</i>	<i>Description</i>
ADULT COMPANION <ul style="list-style-type: none">• IFS Waiver• Comprehensive Waiver	<p>Assistance necessary to meet the individual’s day-to-day activity and daily living needs and to reasonably assure adequate support at home and in the community to carry out personal outcomes. Cueing and supervision of activities is included.</p> <p>Examples include:</p> <ul style="list-style-type: none">• Providing companionship and social interactions• Assistance to or supervising the individual with such tasks as light housekeeping, meal preparation, laundry or shopping, though these activities are not performed as discrete services or for more than 20% of time worked.
PERSONAL SUPPORT <ul style="list-style-type: none">• IFS Waiver• Comprehensive Waiver	<p>Assistance necessary to meet the individual’s day-to-day activity and daily living needs and to reasonably assure adequate support at home and in the community to carry out personal outcomes. Cueing and supervision of activities is included. This service may not be used in place of eligible Medicaid State Plan Home HealthCare services. Provision of services is limited to the person’s own or family home and/or in their community.</p>
INDIVIDUALIZED HOME SUPPORTS <ul style="list-style-type: none">• IFS Waiver• Comprehensive Waiver	<p>Assist with the acquisition, improvement and/or retention of skills and provide necessary support to achieve personal outcomes that enhance an individual’s ability to live in their community as specified in their Individual Plan. This service is specifically designed to result in learned outcomes, but can also include elements of personal support that occur naturally during the course of the day.</p> <p>Examples of the type of support that may occur in these settings include:</p> <ul style="list-style-type: none">• Provision of instruction and training in one or more need areas to enhance the individual’s ability to access and use the community implement strategies

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>INDIVIDUALIZED HOME SUPPORTS CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>to address behavioral, medical or other needs identified in the Individual Plan:</p> <ul style="list-style-type: none"> • Implement all therapeutic recommendations including Speech, O.T., P.T., and assist in following special diets and other therapeutic routines • Mobility training or Travel training • Training or practice in basic consumer skills such as shopping or banking • Assisting the individual with all personal care activities
<p>RESPIRE</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Services provided to individuals unable to care for themselves; furnished on a short-term basis because of the absence or need for relief of those persons normally providing the care. This service may be self-directed.</p> <p>Service Settings: Consumer’s home, home of Qualified Respite Provider, DDS operated Respite Centers, Private Certified Respite Homes, community locations, approved respite facilities.</p> <p>Examples: Weekend stay at certified respite provider’s home, four hours of in-home respite relief for parents. Saturday group respite at a community center, and attendance at approved respite/camp facilities.</p>
<p>LIVE-IN CAREGIVER</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>When a waiver service such as Individualized Home Supports or Personal Support is provided by an unrelated, live-in caregiver, funding is available to cover the additional costs of rent and food that can be reasonably attributed to the unrelated live-in personal caregiver who resides in the waiver participant’s home. The reimbursement for the increased rental costs will be based on the DDS Rent Subsidy Guidelines and will follow the limits established in those guidelines for rental costs. The reimbursement for food costs will</p>

Appendix A: Waiver Service Descriptions, CONTINUED

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>LIVE-IN CAREGIVER CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>be based on the USDA Moderate Food Plan Cost averages. Payment will not be made when the participant lives in the caregiver’s home or in a residence that is owned or leased by the service provider.</p>
<p>TRANSPORTATION</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Service offered in order to enable individuals served under the Waivers to gain access to waiver and other community services, activities and resources, specified by the plan of care. This service may be self-directed.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Travel to and from day program, travel for shopping or recreation. • In group transportation models the rate includes the driver of the vehicle. <p>Whenever possible, family, neighbors, friends, or community agencies that can provide this service without charge will be utilized. Payment for service may not be made when provided by the parent of a minor child or the individual’s spouse, or when delivered by other family members who would normally provide the service for the individual without charge as a matter of course in the usual relationship among members of a nuclear family.</p>
<p>HEALTHCARE COORDINATION</p> <ul style="list-style-type: none"> • IFS Waiver 	<p>Assessment, education and assistance provided by a registered nurse to those waiver participants with identified health risks, who, as a result of their intellectual disability, have limited ability to identify changes in their health status or to manage their complex medical conditions. These participants have medical needs that require more healthcare coordination than is available through their primary healthcare providers to assure their health, safety and well-being. Support provided includes, but is not limited to, the following: train/retrain staff</p>

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>HEALTHCARE COORDINATION CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver 	<p>on interventions, monitor the effectiveness of interventions, coordinate specialists, evaluate treatment recommendations, review lab results, monitor, coordinate tests/results, and review diets.</p>
<p>CLINICAL BEHAVIORAL SUPPORT SERVICES</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Clinical and therapeutic services which are not covered by the Medicaid State Plan, necessary to improve the individual's independence and inclusion in their community. Professional clinical services include:</p> <ul style="list-style-type: none"> • Assess and evaluate the behavioral and clinical need(s); • Develop a behavioral support plan that includes intervention techniques as well as teaching strategies for increasing new adaptive positive behaviors, and decreasing challenging behaviors addressing these needs in the individual's natural environments; • Provide training to the individual's family and the support providers in appropriate implementation of the behavioral support plan and associated documentation; and, • Evaluate the effectiveness of the behavioral support plan by monitoring the plan on a monthly basis, and by meeting with the team one month after the implementation of the behavior plan, and in future three month intervals. The service will include any changes to the plan when necessary and the professional(s) shall be available to the team for questions and consultation.
<p>INDIVIDUAL GOODS/ SERVICES SUPERVISOR</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>This service may be used by an individual to hire an employee as a supervisor to assist with the day to day coordination of services and with day-to-day supervision of direct hire employees. The Self Direction Supervisor must be an objective third party.</p>

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Appendix A: Waiver Service Descriptions, CONTINUED

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
INDIVIDUAL GOODS/ SERVICES SUPERVISOR CONTINUED <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Examples of acceptable activities for the supervisor include the following:</p> <ul style="list-style-type: none"> • Assistance with day-to-day supervision of staff to meet the outcomes outlined in the Individual Plan • Training and assistance with daily oversight of staff including the completion of timesheets and documentation of services provided • Training and assistance with implementing an emergency back-up plan; • Training and assistance with accessing community services and day-to-day coordination of approved services; • A Self Direction Supervisor cannot be a legal guardian of a person or an immediate relative (mother, father or sibling).
NUTRITION <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>Clinical assessment and development of special diets, positioning techniques for eating; recommendations for adaptive equipment for eating and counseling for dietary needs related to medical diagnosis for participants and paid support staff.</p>
INTERPRETER SERVICES <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Service of an interpreter to provide accurate, effective, and impartial communication where the waiver recipient or representative is deaf or hard-of-hearing or where the individual does not understand spoken English. This service may be self-directed.</p>
INDEPENDENT SUPPORT BROKER <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Support and Consultation provided to individuals and/ or their families to assist them in directing their own plans of individual support. This service may be self-directed. Examples:</p> <ul style="list-style-type: none"> • Assistance with managing the Individual Budget; • Support with and training on how to hire, manage and train staff;

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>INDEPENDENT SUPPORT BROKER CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<ul style="list-style-type: none"> • Assistance with negotiating service rates with Provider agencies; • Accessing community activities and services including helping the individual and family with day-to-day coordination of approved services; • Developing an emergency back-up plan; • Self-advocacy training; • Assistance with developing a circle of support.
<p>INDIVIDUAL SUPPORTED EMPLOYMENT</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>A supported employment placement strategy in which an employment specialist (job coach) places a participant into competitive employment through a job discover process, provides training and support, and then gradually reduces time and assistance at the worksite. This service option may also include development and on-going support for self employment by the participant.</p> <p>This assistance consists of:</p> <ul style="list-style-type: none"> (a) assisting the participant to identify potential business opportunities; (b) assisting the participant in the development of a business plan, including potential sources of business financing and other assistance in developing and launching a business; (c) identification of the supports that are necessary in order for the participant to operate the business; and, (d) ongoing assistance, counseling and guidance once the business has been launched.
<p>GROUP SUPPORTED EMPLOYMENT</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Group Supported Employment (GSE):</p> <ul style="list-style-type: none"> a) A supported employment situation in a competitive employment environment in which a group of participants with disabilities are working at a particular work setting.

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Appendix A: Waiver Service Descriptions, CONTINUED

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>GROUP SUPPORTED EMPLOYMENT CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>The participants may be disbursed throughout the company and among workers without disabilities or congregated as a group in one part of the business; or</p> <p>b) Mobile Work Crew: A group of participants who perform work in a variety of locations under the supervision of a permanent employment specialist (job coach/supervisor).</p>
<p>DAY SUPPORT OPTIONS</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Services and supports lead to the acquisition, improvement, and/or retention of skills and abilities to prepare an individual for work and/or community participation, or support meaningful socialization, leisure, and retirement activities.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Develop and implement an individualized support plan; • Develop, maintain or enhance independent functioning skills in the areas of sensory-motor, cognition, personal grooming, hygiene, toileting, etc.; • Assist in developing and maintaining friendships of choice and skills to use in daily interactions; • Develop work skills; • Provide opportunities to earn money; • Provide opportunities to participate in community activities.
<p>SHELTERED EMPLOYMENT</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>The department is working with it's stakeholders and CMS to determine the future services of sheltered employment.</p>

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>ADULT DAY HEALTH SERVICES</p> <ul style="list-style-type: none"> • Employment Waiver 	<p>Adult day health services are provided through a community-based program designed to meet the needs of cognitively and physically impaired adults through a structure, comprehensive program that provides a variety of health, social and related support services including, but not limited to, socialization, supervision and monitoring, personal care and nutrition in a protective setting during any part of a day. There are two different models of adult day health services: the social model and the medical model. Both models shall include the minimum requirements described in Section 17b-342-2(b)(2) of the DSS regulations. In order to qualify as a medical model, adult day health services shall also meet the requirements described in Section 17b-342-2(b)(3) of the DSS regulations.</p>
<p>INDIVIDUALIZED DAY SUPPORTS</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Services and supports provided to individuals tailored to their specific personal outcomes related to the acquisition, improvement, and/or retention of skills and abilities to prepare and support an individual for work and/or community participation and/or meaningful retirement activities, or for an individual who has their own business, and could not do so without this direct support. This service may be self-directed. This service includes the transportation required by the individual to participate in these activities.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Develop and implement an individualized support plan; • Develop, maintain or enhance independent functioning skills in the areas of sensory-motor, cognition, personal grooming, hygiene, toileting, etc.; • Assist in developing and maintaining friendships of choice and skills to use in daily interactions; • Provide support to explore job interests, retirement options;

CONTINUED ON NEXT PAGE

Appendix A: Waiver Service Descriptions, CONTINUED

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>INDIVIDUALIZED DAY SUPPORTS CONTINUED</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<ul style="list-style-type: none"> • Provide opportunities to participate in community activities; • Provide support to complete work or business activities; • Training and supervision to increase or maintain self-help, socialization, and adaptive skills to participate in own community.
<p>SPECIALIZED MEDICAL EQUIPMENT & SUPPLIES</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver • Employment Waiver 	<p>Devices, controls or appliances specified in the Individual Plan, which enable individuals to increase their abilities to perform activities of daily living or to perceive, control, or communicate with the environment in which they live. This service also includes items necessary for life support, ancillary supplies, and equipment necessary to the proper functioning of such items, and durable and non-durable medical equipment not available under the Medicaid State Plan. Examples:</p> <ul style="list-style-type: none"> • Generators, adaptive switches or controls, specialized communication devices
<p>ENVIRONMENTAL MODIFICATIONS</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>Those physical adaptations to the home which 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. Examples:</p> <ul style="list-style-type: none"> • Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems, which are necessary to accommodate the medical equipment and supplies, which are necessary for the welfare of the individual. • Service Utilization: Up to \$15,000 over the term of this waiver (five years).

Waiver Services, continued

<i>Type of Support</i>	<i>Description</i>
<p>VEHICLE MODIFICATION</p> <ul style="list-style-type: none"> • IFS Waiver • Comprehensive Waiver 	<p>Alterations made to a vehicle that is the individual's primary means of transportation when such modifications are necessary to improve the individual's independence and inclusion in the community, and to avoid institutionalization. The vehicle may be owned by the individual, a family member with whom the individual lives or has consistent and on-going contact, or a non-relative who provides primary long-term support to the individual and is not a paid provider of such services. This service explicitly excludes:</p> <ol style="list-style-type: none"> 1) adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit of the individual; 2) purchase or lease of a vehicle; 3) regular scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications. <p>Service Utilization: Up to \$10,000 over the term of this waiver (five years). Once this cap is reached, \$750 per individual per year may be allowable for repair, replacement or additional modification with prior approval.</p>

Appendix B: Fact Sheets, Internet Sites & Other Resources

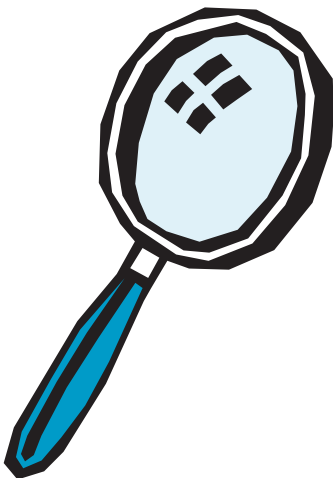
Many of the resources listed below are from the DDS Website: www.ct.gov/dds/, or can be obtained from your case manager.

You can also ask your case manager/support broker for printed copies of these fact sheets and other resources.

<i>Category</i>	<i>Resource</i>
DDS ELIGIBILITY:	<p>Eligibility Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=382310</p>

Appendix B: Fact Sheets, Internet Sites & Other Resources, CONTINUED

<i>Category</i>	<i>Resource</i>
HCSB WAIVERS:	DDS HCBS Waiver Manual (LINK PLUS APPENDICES) http://www.ct.gov/dds/lib/dds/waiver/hcbs_consolidated_waiver_operations_manual.pdf
SELF DETERMINATION AND PERSON CENTERED PLANNING:	Self Determination Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=382256 Person Centered Planning Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=382266 It's My Choice . . . by William T. Allen, Ph.D. (2002) www.allenshea.com A Decision-Making Guide Developed for the Minnesota Governor's Council on Developmental Disabilities www.mncdd.org
HIRING AND MANAGING YOUR OWN SUPPORTS:	DDS Registry Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=383906 Hiring and Managing Your Own Supports Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=382316 Using a Fiscal Intermediary Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=382278 Criminal History and Background Check Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=383742 Workers Compensation and Liability Insurance Fact Sheet http://www.ct.gov/dds/cwp/view.asp?a=2050&q=383718 Employee Recruitment Website http://www.rewardingwork.org



Appendix C: Frequently Asked Questions



Children's Services

Q *Can children receive waiver services?*

A Children under age 3 are not eligible for DDS HCBS Waiver services. Children between the ages of 3-7 who have a developmental disability and a strong likelihood that the developmental disability will result in Mental Retardation may be enrolled in the IFS Waiver when resources are available. When IQ testing is completed, if it is found that the child does not have Mental Retardation, he or she will be removed from the waiver at that time and services would be discontinued. Children with mental retardation who need waiver services to remain with their families, or whose families need supports, can get them through the waivers based on urgency of need.

Eligibility

Q *Can individuals who have been determined eligible for DDS supports through an administrative hearing be enrolled in the waivers?*

A Yes. Individuals who are found eligible for DDS services through an administrative eligibility hearing are eligible for DDS waivers.

Enrollment

Q *Is there any difference in the process of enrollment for the IFS and Comprehensive Waivers?*

A No, the process is the same.

Appendix C: Frequently Asked Questions, CONTINUED

Funding

Q *Are one-time or emergency funds available, if needed?*

A Individuals who are enrolled in a waiver should have access to emergency temporary supports as best as the region can provide. All department supports provided to individuals on waivers should be provided with waiver services, as much as possible. Temporary support decisions can be made outside of PRAT with a notification to PRAT; however, ongoing needs should be referred to PRAT.

Hiring Staff

Q *Can I use my individual budget to pay my family member to be my service provider?*

A Sometimes. There are some things that are not allowed. For example the Waiver funds cannot be used to pay for services that a family member would ordinarily provide in a family (for example, personal support of a minor child by his or her parent, or personal support provided by a spouse). Waiver funded services are not supposed to replace supports that you are already getting from and are typically provided by family members who live with you. Hiring family members requires authorization through the prior approval process.

Q *Can I hire DDS staff to provide my waiver services on his or her time off?*

A Yes, in some cases. When DDS staff are asked by an individual or family to provide supports, the DDS employee should notify his or her supervisor and the regional Human Resources Director to ensure any potential ethics issues are addressed.



Individual Budget

Q *What can I purchase with my Individual Budget??*

A This will depend on the waiver that you are enrolled in and the allocation you are given.

Q *What happens if I do not spend all the money in my budget?*

A Funds may only be used to purchase supports and services, which are authorized in the Individual Plan and budget through established processes. Unspent funds will be re-allocated to meet the needs of other individuals.

Q *Are the individual funds I receive from the waiver taxable income to my family or me?*

A No. Waiver funds are not taxable income, nor will any funds be given to you or your family member in the form of cash. Individual budget funds may be used to purchases supports and services you need. All payments for these services will be made by a fiscal intermediary.

Level of Need

Q *What can I do if I disagree with the Level of Need assigned to me?*

A You can ask that the PRAT review the results of the assessment again, or reconsider the initial funding amount through your case manager. If DDS denies you a waiver service because of your Level of Need, then you will be provided information about how to appeal the decision through DSS.

Appendix C: Frequently Asked Questions, CONTINUED

Portability

Q *Does my individual budget stay the same if I move from one DDS Region to another? Can I transfer my individual budget funds if I move to another state?*

A The funding based on your LON remains the same if you move from one region to another. Waiver funds cannot be used in another state unless the provider is also enrolled in the Connecticut DDS waiver program. If you move to another state, DDS will talk with your new state about helping to make the transition, but is not required to provide any service or supports if you are not a resident of Connecticut.

Staff Qualifications

Q *Do family members that I hire to deliver a waiver service have to be a qualified provider?*

A No, but they do need to meet the requirements defined for direct-hire staff in our waivers. Your Fiscal Intermediary will provide a list of requirements to you.

Q *How do I provide the training that is required by DDS to my direct-hire employees?*

A Prior to starting employment, your staff will be required to read and sign basic DDS policies and procedures training material provided by the fiscal intermediary. Within 90 days of employment, staff are required to complete 18 hours of online training through the College of Direct Support (CDS). The fiscal intermediary will provide staff with information on how to access this training. You are also responsible to train your staff on any special individual training that your staff will need to know about you.



Support Brokers

Q *Do only people who hire their own staff get support brokers?
Can I request a support broker if I feel I need more help than
my case manager can give me?*

A Only people who hire their own staff can have a DDS broker. People enrolled in the waiver have case managers with small caseloads so they should have the time to help you. If you need more help, the case manager can talk to their supervisor to get some assistance with what you might need as well.

Support and Services

Q *Can I be authorized to start receiving a service before
appropriate Medicaid Waiver paperwork is completed?*

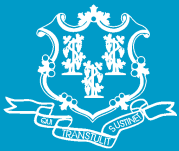
A No. If you begin services before they are authorized, you will be held responsible for payment for these services.

Q *Why isn't camp listed as a waiver service?*

A Camp is not a waiver service. Some camps may qualify as a Respite service.

Appendix D: Frequently Used Acronyms

DDS:	Department of Developmental Services
CLA:	Community Living Arrangement
CCM:	Community Companion Home
CDS:	College of Direct Support
URR:	Utilization Resource Review
DSS:	Department of Social Services
FI:	Fiscal Intermediary
HCBS:	Home and Community Based Services
HRC:	Human Rights Committee
LON:	Level Of Need
ICF/MR:	Intermediate Care Facility/Mental Retardation
IP:	Individual Plan
PAR:	Programmatic Administrative Review
PRAT:	Planning Resource Allocation Team
PRC:	Program Review Committee
QSR:	Quality Service Review



DDS

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