

Section 3:

Medicaid Waiver Services

What are waiver services?

Home and Community Based Services (HCBS) are a Medicaid entitlement program providing medical care and services for individuals diagnosed with a disability or for older lowans needing additional support. HCBS is designed to allow individuals to remain in their home and community, rather than medical institutions.

What does it mean to have services?

Having services means you can utilize the services based on what waiver you have been approved for. For example, if you qualify and are placed on the Health & Disability waiver, you can access the services provided on that specific waiver. If you need services provided from a different waiver, you will want to look at applying to the waiver that best fits your needs.

Who qualifies for waiver services?

Waiver qualifications are based on the disability or chronic health condition of the individual. You must be an Iowa resident to qualify for Iowa Waiver Services.

What waivers are available?

Iowa currently supports eight HCBS waivers. Please note not all service providers will support all the waivers listed.

AIDS/HIV Waiver (AH)

Acquired Immunodeficiency Syndrome/Human Immunodeficiency Virus Waiver (HCBS AIDS/HIV) provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution.

Target Population: Children and adults diagnosed with AIDS or HIV.

Ages: All

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the AIDS/HIV Waiver:

- Adult Day Care
- Consumer Directed Attendant Care (CDAC)
- Counseling Services
- Home Delivered Meals
- Home Health Aide
- Homemaker
- Nursing
- Respite

Brain Injury Waiver (BI)

Provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

Target Population: Children and adults diagnosed with a brain injury by accident or illness.

Ages: One month or older.

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the Brain Injury Waiver:

- Adult Day Care
- Behavioral Programming
- Case Management
- Consumer-Directed Attendant Care (CDAC)
- Family Counseling and Training
- Home and Vehicle Modification
- Interim Medical Monitoring and Treatment
- Personal Emergency Response

- Prevocational Services
- Respite
- Specialized Medical Equipment
- Supported Community Living
- Supported Employment
- Transportation

Children’s Mental Health Waiver (CMH)

Identify and provide services and supports that are not available through other mental health programs and services that can be used in conjunction with traditional services to develop a comprehensive support system for children with serious emotional disturbance. These services will allow children in this targeted population to remain in their own homes and communities. Provision of these services must be cost effective.

Target Population: Children diagnosed with serious emotional disturbance.

Ages: 0-17.

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the Children’s Mental Health Waiver:

- Environmental Modifications and Adaptive Devices
- Family and Community Support Services
- In-Home Family Therapy
- Respite

Elderly Waiver (E)

Provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

Target Population: Adult 65 years of age or older.

Ages: 65 and up.

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the Elderly Waiver:

- Adult Day Care
- Assistive Devices
- Assisted Living Service
- Case Management
- Chore
- Consumer-Directed Attendant Care (CDAC)
- Home and Vehicle Modification
- Home Delivered Meals
- Home Health Aide
- Homemaker
- Mental Health Outreach
- Nursing
- Nutritional Counseling
- Personal Emergency Response
- Respite
- Senior Companion
- Transportation

Health & Disability Waiver (HD)

Provides service funding and individualized supports to maintain eligible persons in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

Target Population: Children and adults diagnosed with a physical or other medical disability.

Ages: 0-64

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the Health and Disability Waiver:

- Adult Day Care
- Consumer-Directed Attendant Care (CDAC)

- Counseling
- Home and Vehicle Modification
- Home Delivered Meals
- Home Health Aide
- Homemaker
- Interim Medical Monitoring and Treatment
- Nursing
- Nutritional Counseling
- Personal Emergency Response
- Respite

Intellectual Disability Waiver (ID)

Provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

Target Population: Children and adults diagnosed with an intellectual disability.

Ages: All ages.

Talk with your Case Manager for annual testing requirements and unit caps.

Intelligence Quotient (IQ) testing must take place prior to the individual turning 18 to qualify for the ID Waiver.

Services you may receive on the Intellectual Disability Waiver:

- Adult Day Care
- Consumer-Directed Attendant Care (CDAC)
- Day Habilitation
- Home and Vehicle Modification
- Home Health Aide
- Interim Medical Monitoring and Treatment
- Nursing
- Personal Emergency Response

- Prevocational Services
- Respite
- Supported Community Living
- Supported Community Living-Residential Based
- Supported Employment
- Transportation

Physical Disability Waiver (PD)

Provides service funding and individualized supports to maintain eligible persons in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

Target Population: Adults diagnosed with a physical disability.

Age: 18 to 64.

Talk with your Case Manager for annual testing requirements and unit caps.

Services you may receive on the Physical Disability Waiver:

- Consumer-Directed Attendant Care (CDAC)
- Home and Vehicle Modification
- Personal Emergency Response
- Specialized Medical Equipment
- Transportation

What other programs are available in partnership with Medicaid Waivers?

Dual Enrolled Medicare-Medicaid

Individuals who are eligible for Medicare and Medicaid are referred to as “Dually Eligible”. These are individuals who experience higher rates of chronic illness requiring long-term care. Dually eligible members may receive better healthcare coverage and lower out-of-pocket costs. Medicare is the primary payer. If Medicare does not cover the cost in its entirety, Medicaid (secondary payer) will pay the remaining cost if they are covered under Medicaid expenses.

Additional Resource for Dually Eligible:

<https://www.medicare.gov/sites/default/files/2021-10/02179-Medicare-and-other-health-benefits-your-guide-to-who-pays-first.pdf>

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)

Eligible Waivers: All

<https://www.iowaepsdt.org/iowa-epsdt/>

Iowa EPSDT Care for Kids is the state’s federally mandated Medicaid program for children. The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program was first created by Congress in 1967.

Any person under the age of 21 enrolled in Medicaid through a state plan is eligible for EPSDT.

If an individual has nursing services, EPSDT should be discussed with the care team for consideration of extra support in the school system.

According to the Iowa Medicaid EPSDT Care for Kids website there are three levels of developmental care:

• **Level 1 Care**

- For all children:
 - Federal Medicaid guidelines require primary health care providers to review development at every well child visit. This includes:
 - Review cognitive, motor, language, adaptive, and social-emotional milestones.
 - Address parental concerns about development, behavior, or emotions.
 - Assess family risk factors, including parental stress, depression, violence, substance use, financial stress, etc.
 - Iowa Medicaid Enterprise endorses the AAP recommendation for developmental and autism screening for all children.
 - Developmental Screening at 9 months, 18 months, and 24-30 months.
 - Autism screening at 18 and 24 months.

• **Level 2 Care**

- For at risk children:

- Additional screening of development, social emotional and behavioral concerns, and caregiver depression and family stress.
 - General Development: Ages and Stages Questionnaires, Third Edition (ASQ-3) can be administered at additional times (1-66 months).
 - Behavioral-Emotional: Ages and Stages Questionnaires: Social-Emotional (ASQ:SE-2) (3-66 months).
 - Care coordination to assist the child, family, and healthcare team develop a plan of care to optimize the child's development and support the family.
 - Brief interventions by the healthcare provider or other professional to promote child development and well-being.
- **Level 3 Care**
 - For children with identified developmental or social emotional concerns:
 - Referral of children identified with a developmental or social emotional concern for a comprehensive diagnostic evaluation.
 - Care coordination to assist the child, family, healthcare team, and other professionals to develop a family centered plan of care to optimize the child's development and support the family.
 - More intensive interventions to address the developmental or social emotional concern.
 - Periodic reassessment of progress.

Habilitation Services Program

Provide services funding and individualized supports to maintain eligible persons in their own homes or communities who would otherwise require care in a medical institution. Provision of these services must be cost effective.

- Target Population: Iowans diagnosed with a functional impairment typically associated with chronic mental illness. Designed to assist in acquiring, retaining, and improving adaptive skills to successfully live-in home and community-based settings.
- Ages: 18 and up.
- Talk with your Case Manager for annual testing requirements and unit caps.

- Services you may receive on the Habilitation Waiver:
 - Case Management
 - Home-Based Habilitation
 - Day Habilitation
 - Prevocational Services
 - Supported Employment

Integrated Health Home (IHH)

Eligible Waivers: Children's Mental Health Waiver & Habilitation

Integrated Health Home (IHH) is a team of professionals, including family and peer support services, working together to provide whole-person, patient-centered, coordinated care for adults with a serious mental illness (SMI) and children with a serious emotional disturbance (SED). This includes individuals currently receiving Targeted Case Management (TCM) and Case Management through Medicaid funded Habilitation. Care coordination is provided for all aspects of the individual's life and for transitions of care the individual may experience. The IHH is required to assist individuals with their paperwork and guide them through the application process for benefits for which they qualify. The IHH is required to coordinate all services for an individual, including medical, behavioral, and community services regardless of the funding sources for those services.

Integrated Health Home may be provided in:

- Member's home and community
- Cannot be provided in the provider's home

Medicare

Medicare is a federal government health insurance program for individuals 65 years of age and older and for those living with a disability or other illness under the age of 65. Before deciding on a plan, take the time to review each plan in its entirety. Medicare is broken down into four parts based on coverage:

- **Part A:** Covers hospital care and services related to hospital care. This does not include custodial or long-term care.
- **Part B:** Covers outpatient medical care and doctor's appointments. This includes ambulance services, mental health coverage, durable medical equipment, and some prescription drugs.

- **Part C:** Covers the benefits in Parts A and B but is offered through a private insurer. This plan is commonly referred to as Medicare Advantage and in some cases covers Part D's prescription drug coverage. This plan may also include vision, hearing, and dental care.
- **Part D:** Covers Prescription Medication (generic and brand name). A monthly premium is required for the program and is offered through a private insurer.

Medigap: A health insurance policy from a private insurer to help offset the costs not covered by Part A and Part B. Items may include deductibles and coinsurance when outside of the United States. In Iowa, Medigap plans range in cost from \$65 to \$342 each month based on coverage.

Additional Resources for Medicaid:

- <https://www.medicaid.gov/>
- <https://dhs.iowa.gov/ime/members>

Medicaid for Employed Persons with Disabilities (MEPD)

Is a Medicaid coverage allowing an individual diagnosed with a disability the right to work while continuing to have access to medical services.

According to the Iowa Department of Human Services website an individual is eligible for MEPD if they meet the following requirements:

- Is under age 65.
- Is still considered to be disabled based on SSI medical criteria for disability.
- Has earned income from employment or self-employment.
- Meets general SSI-related Medicaid eligibility requirements.
- Is not eligible for any other Medicaid coverage group other than QMB, SLMB, or Medically Needy.
- Have resources less than \$12,000 for an individual and \$13,000 for a couple.
- Has net family income less than 250% of the federal poverty level.
- Pays any premium due for the monthly eligibility.
- **Additional Resource for MEPD:**
 - <https://dhs.iowa.gov/ime/members/medicaid-a-to-z/mepd>