



Introduction to Virginia's 1915(c) Waivers

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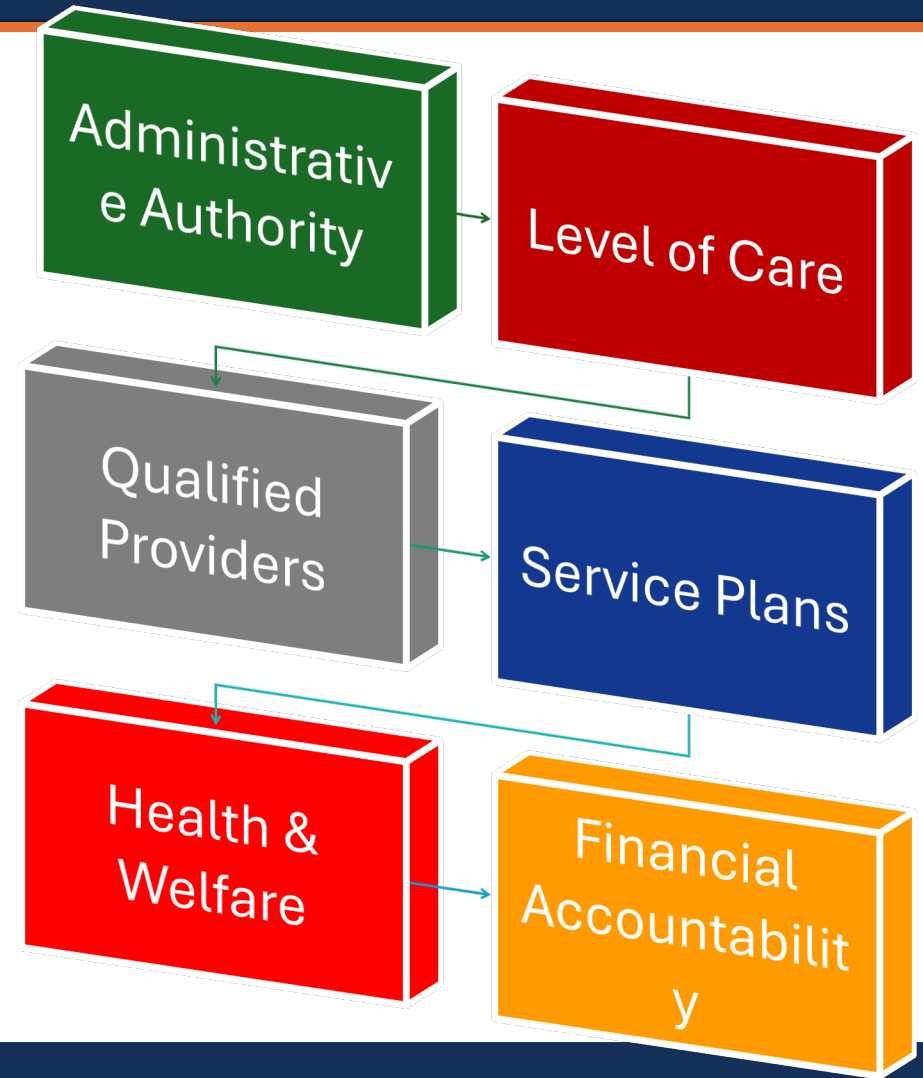


What are 1915(c) waivers?

- Home and Community-Based Services (HCBS) waivers allow individuals to receive long-term services and supports at home or in the community rather than an institutional setting.
- 1915(c) of the Social Security Act enables states to ask for "waivers" to normal Medicaid rules to allow HCBS to be provided to targeted groups.
 - Waivers can "waive":
 - Statewideness
 - Comparability of Services
 - Income and resource rules
 - Limits to a particular diagnosis or diagnoses
- Waiver services must be more cost-effective than services in an institution.

1915(c) Waiver Requirements

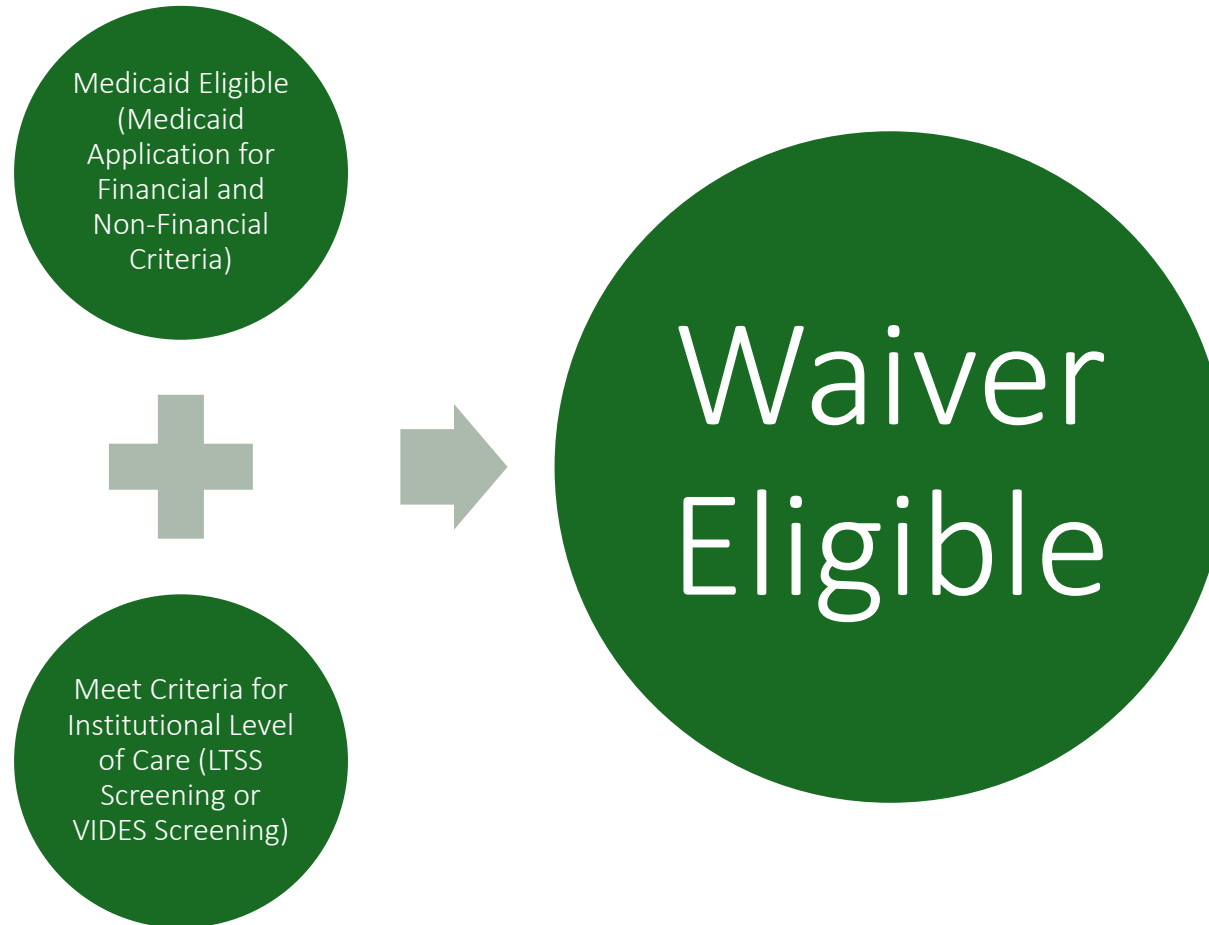
- States must demonstrate to the Centers for Medicare and Medicaid Services (CMS) that the waivers meet certain requirements



Home and Community Based Settings Rule

- In 2014, CMS finalized the “Home and Community Based Services (HCBS) Settings Regulations” (often called the HCBS Rule). Virginia anticipates that all waiver funded settings will be in full compliance by the end of 2025.
- The crux of the rule is that CMS intends to ensure that individuals receiving services and supports through Medicaid’s HCBS programs have full access to the benefits of community living and are able to receive services in the most integrated setting.
- Virginia's CMS Approved Statewide Transition Plan: [Statewide Transition Plans | Medicaid](#)
- DMAS hosts on their website an [HCBS Toolkit](#) for providers seeking clarification and resources on elements of compliance with the rule.

How is an individual eligible for a 1915(c) waiver?



Waiver Life Cycle

State submits
waiver
application to
CMS

State submits
waiver
amendments as
needed

State submits
waiver renewal
(5 years in
Virginia)

Virginia has four 1915(c) waivers

- **Developmental Disability Waivers**

- Names of the Waivers:
 - Building Independence (BI)
 - Community Living (CL)
 - Family and Individual Supports (FIS)
- Alternative Institution: ICF/IID
- For persons with a diagnosis of an intellectual and/or developmental disability
- Waivers have a limited number of "slots"
- All waiver services are fee-for-service

- **Commonwealth Coordinated Care Plus (CCC Plus) Waiver**

- Alternative Institution: Nursing Facility (NF), specialized care facility, or long-stay hospital
- Covered populations:
 - Older adults (65 and older)
 - Individuals who have a physical disability
 - Individuals who are chronically ill or severely impaired, having experienced loss of a vital body function, and who require substantial and ongoing skilled nursing care.
- No waitlist
- Waiver has combined 1915(b)/1915(c) authority: individuals can receive waiver services either through fee-for-service or through managed care

How to Access CCC Plus Waiver Services

Individuals are assessed to determine if they meet the nursing facility level of care

Community

- Local Departments of Health & Social Service
- Program of All-Inclusive Care (PACE)

Hospital

- Hospital Discharge Planner or Social Worker

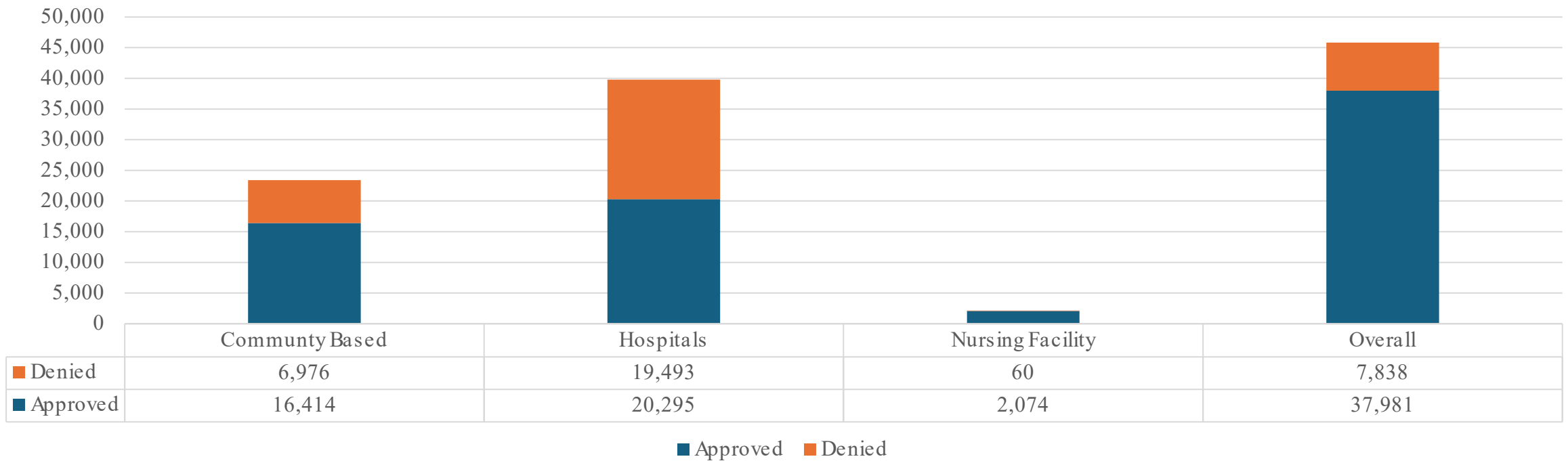
Nursing Facility (NF)

- NF Nurse and Social Worker
- For members receiving skilled rehabilitation services

Total LTSS Screenings CY'23

Total Screenings Conducted: 45,819

LTSS Screening Approvals and Denials



CCC Plus Waiver

- Delivered through managed care (except for exempt populations)
 - 1915b/c waiver authority
- Waiver Criteria
 - Functional capacity needs – the degree of assistance needed to complete activities of daily living (ADLs) such as bathing, dressing, toileting, and eating. Mobility and behavioral needs are also considered
 - Needs are rated as either independent, semi-dependent, dependent, mechanical help or requiring human help
 - Functional Need criteria is met when rated as one of the following is met:
 - Rated dependent in two to four of the ADLs, and also rated semi-dependent or dependent in Behavior Pattern and Orientation, and semi-dependent or dependent in Joint Motion or dependent in Medication Administration.
 - Rated dependent in five to seven of the ADLs, and also rated dependent in Mobility.
 - Rated semi-dependent or dependent in two to seven of the ADLs, and also rated dependent in Mobility and Behavior Pattern and Orientation.
 - Must have a medical or nursing need
 - Must be at risk for institutionalization within 30 days

CCC Plus Waiver Services

- Adult Day Health Care
- Personal Assistance Services
- Private Duty Nursing
- Respite care
- Services Facilitation (for CD services)

- Assistive Technology
- Environmental Modifications
- Personal Emergency Response System
- Transition Services

Applying for DD Waivers

- To apply for a Developmental Disability Waiver slot, contact the local [Community Services Board](#). The Community Services Board (CSB) staff will determine if you:
 - Meet Virginia's [Definition of Developmental Disability](#). (Diagnostic Eligibility)
 - Meet the functional criteria for the VA Individual Developmental Disability Eligibility Survey (VIDES)
- Do not have to be financially eligible while on the DD waiver waitlist.
- The individual must meet financial eligibility once a waiver slot is assigned. This will be determined by the local Department of Social Services.
- Be willing to accept services within 30 days of slot assignment.

Virginia's Three Waivers for People with Developmental Disabilities

Building Independence Waiver

This waiver is for adults 18 years and older who are able to live independently.

People with this waiver usually own, lease, or control their own living arrangements and supports are complemented by non-waiver-funded rent subsidies.

They don't need supports all the time.

Family and Individual Supports Waiver

This waiver is available to both children and adults.

People with this waiver may live with their family, friends, or in their own homes.

Some people may need supports with some medical and/or behavioral needs.

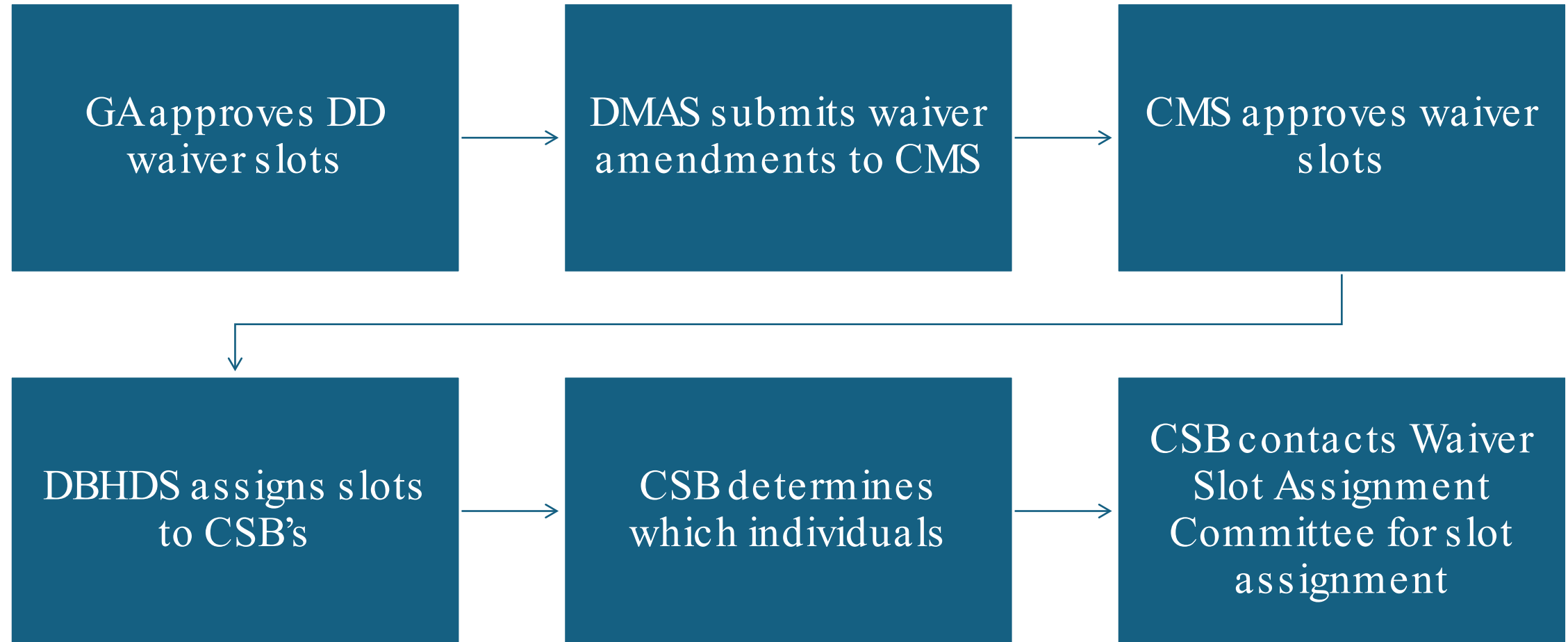
Community Living Waiver

This waiver is available to both children and adults.

People with this waiver usually require supports in their homes all the time.

Some people may need to live in these homes with staff to receive supports with complex medical and/or behavioral needs.

DD Waiver Slot Allocation Process



DD Waivers Waitlist

Statewide Waiver Wait List



**Priority
One Status**

**Priority
Two Status**

**Priority
Three Status**

- Currently, waiver Slots are only assigned to those with priority one status to ensure those most in need access services first.
- Legislative session passed budget for 3400 new DD waiver slots to eliminate most of the priority one waitlist.

Total Waiver Slots*	Over 18,000
Total Waiver Waitlist*	Over 15,000
Priority One	Over 3600
Priority Two	Over 6500
Priority Three	Over 5000

*Approximation as of 08/01/2024

Developmental Disabilities Waiver Services Part 1

BI	FIS	CL	Employment and Day Options
X	X	X	Individual Supported Employment
X	X	X	Group Supported Employment
	X	X	Workplace Assistance
X	X	X	Community Engagement
X	X	X	Community Coaching
X	X	X	Group Day Support

BI	FIS	CL	Residential Options
X			Independent Living Supports
X	X	X	Shared Living
	X	X	In-Home Supports
	X	X	Supported Living
		X	Group Home Residential
		X	Sponsored Residential

BI	FIS	CL	Consumer Directed/Agency Directed Options
	X	X	Service Facilitation (For CD Services)
	X	X	Companion
	X	X	Personal Assistance Services
	X	X	Respite

Developmental Disabilities Waiver Services Part 2

BI	FIS	CL	Additional Options
X	X	X	Assistive Technology
X	X	X	Benefits Planning
X	X	X	Community Guide
X	X	X	Electronic Home-Based Services
	X		Individual and Family/Caregiver Training
X	X	X	Environmental Modifications
X	X	X	Employment and Community Transportation
X	X	X	Peer Mentor Supports
X	X	X	Transition Services

BI	FIS	CL	Crisis Support Options
X	X	X	Center Based Crisis Supports
X	X	X	Community-Based Crisis Supports
X	X	X	Crisis Support Services

BI	FIS	CL	Medical and Behavioral Supports
	X	X	Private Duty Nursing
	X	X	Skilled Nursing
	X	X	Therapeutic Consultation
X	X	X	Personal Emergency Response System (PERS)

Spotlight on Personal Care Services

- Provides support to members for activities of daily living
- Agency or Consumer Directed
- FY'23 over 50,000 unique members received personal care
- Legally responsible individuals (parents of minors and spouses) can serve as the attendants and receive reimbursement for up to 40 hours per week

Personal Care Services Models of Delivery

Agency
Directed

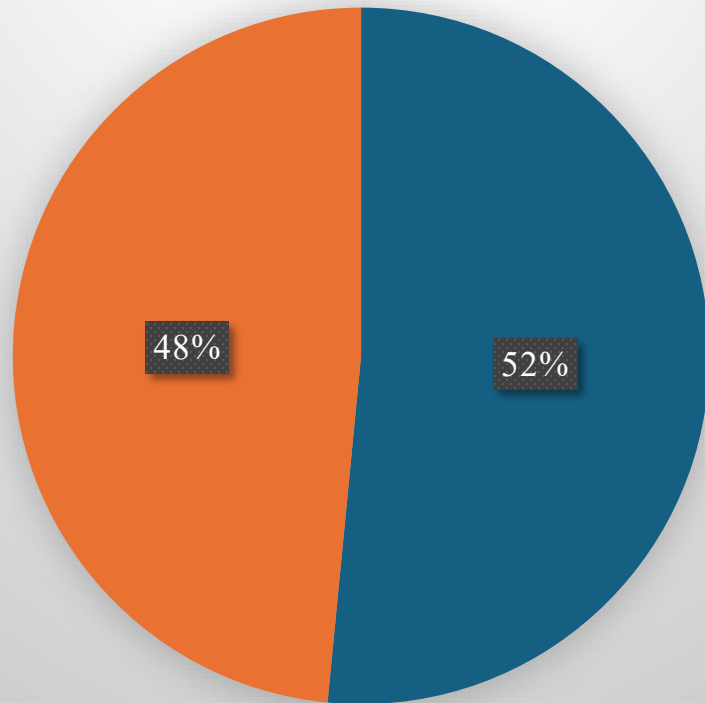
- Traditional
- Services provided by staff employed by a provider agency

Consumer
Directed

- Individual receiving services directs care
- Staff is employed by the Member or their representative
- Receive support from a Services Facilitation provider
- Personal assistance services, respite, companion
- Contracted Fiscal Agent provides payroll services

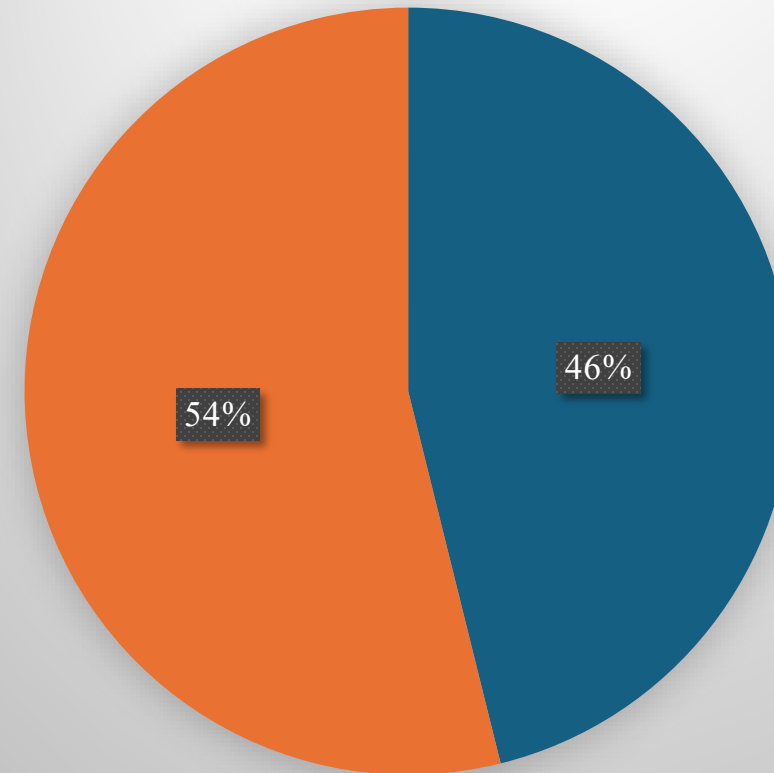
Agency Directed vs Consumer Directed Personal Care

FY'23 Expenditures



■ AD Services ■ CD Services

FY'23 Members



■ AD Service
■ CD Service

1915(c) Waiver: Legally Responsible Individuals (LRI)

- Who is a legally responsible individual?
 - A legally responsible individual is someone who has a legal responsibility to provide care to a loved one.
 - By its definition, a LRI is a primary caregiver.
 - In Virginia, there are two groups: parents/legal guardians of minor children and spouses.
 - Does not apply to:
 - Parents of adult children
 - Grandparents
 - Siblings
 - Aunts, uncles, cousins, nieces, nephews
- What does this mean in terms of Medicaid?
 - LRI are normally prohibited from being paid to provide Medicaid-reimbursed services.
 - One exception: 42 CFR §440.167
 - Personal care services
 - States may apply for a waiver from this restriction
 - Applies ONLY to Home and Community-Based Services Waivers
 - Still not allowed in EPSDT, Medicaid Works
 - Still not allowed in non-personal care services (nursing, habilitation services, community integration services)

1915(c) Waiver Initiatives: Electronic Visit Verification (EVV)

- What is EVV?
 - Required under the 21st Century CURES Act
 - Agency-directed and Consumer-Directed Personal Care/Assistance, Respite, and Companion
 - Meant to ensure Medicaid payments are being made for services rendered
- It became required as of September 1, 2020
 - Live-in aides and attendants are exempt per the General Assembly
 - Personal care agencies use their own EVV system
 - Consumer-directed attendants download EVV app owned by the Fiscal-Employer Agent
 - Attendants can use the web portal for situations when EVV cannot be done (app not working, unable to access the app)
- The Office of Community Living is currently reviewing reports of Consumer-Directed attendants who are not using the EVV method and developing methods to increase compliance with this federal requirement

Waiver Service Expenditures (FY2023)

- CCC+ Waiver

- Approximately 49,000 members
- Average cost per member = \$32,000
- Total Paid = Approximately \$1.6 Billion

- Ages Served

- Approximately 9,000 members age 20 and under
- Approximately 40,000 members age 21 and over

- DD Waivers

- Approximately 16,000 members
- Average cost per member = \$105,000
- Total Paid = Approximately \$1.7 Billion

- Ages Served

- Approximately 2,000 members age 20 and under
- Approximately 14,000 members age 21 and over

Waiver Cost Effectiveness (FY'22)

	CCC Plus	Community Living	Family and Individual Supports	Building Independence
Waiver+ Acute Care Costs per member	\$41,727	\$111,493	\$63,945	\$29,870
Institutional+ Acute Care Costs per member	\$51,916	\$250,947	\$250,947	\$250,947
CMS 372- Annual Report on Home and Community-Based Services Waivers				