

Access and Intake Services Community Options

This booklet is also available on the DADS Internet site at:

http://www.dads.state.tx.us/providers/community_options.pdf

Prepared by Regional and Local Services

February 24, 2009

Access and Intake Services

Table of Contents

Access and Intake Division Overview	
Regional and Local Services	
Adult Foster Care (AFC)	5
Community Attendant Services (CAS)	7
Community Based Alternatives (CBA)	
Community Living Assistance and Support Services (CLASS)	15
Consolidated Waiver Program (CWP)	17
Consumer Managed Personal Assistant Services (CMPAS)	20
Day Activity and Health Services (DAHS)	23
Deaf-Blind with Multiple Disabilities (DB-MD)	
Emergency Response Services (ERS)	
Family Care (FC) Services	
Home Delivered Meals Services (HDM)	
Hospice Services	
In-Home and Family Support Program (IHFSP)	
Integrated Care Management (ICM)	
Medically Dependent Children Program (MDCP)	45
Pre-Admission Screening and Resident Review (PASARR)	
Primary Home Care (PHC)	
Program of All-Inclusive Care for the Elderly (PACE)	
Residential Care (RC)	
Special Services to Persons with Disabilities (SSPD)	
Special Services to Persons with Disabilities (SSPD-SAC)	
Area Agencies on Aging (AAA)	63
Access & Assistance Services	
Area Agencies on Aging (AAA)	65
Caregiver Support Services	
In-Home Support Services	
Nutrition Services	70
Mental Retardation Authorities	73
General Revenue Service	73
Home and Community Based Services (HCS)	77
Texas Home Living Program (TxHmL)	80
Intermediate Care Facilities for Persons with Mental Retardation or Related Conditions	
(ICF/MR/RC Program)	82
In-Home and Family Support	
State Mental Retardation Facilities	
Guardianship	87
Promoting Independence	
Community Services Interest List Unit Numbers for Community Programs	
How to Contact a Local DADS Office	
DADS Helpful Numbers	94

Access and Intake Division Overview

Assistant Commissioner for Access and Intake (A&I)

The Assistant Commissioner for Access and Intake reports directly to the DADS Commissioner. The functions under the Assistant Commissioner for A&I include the Area Agencies on Aging (AAAs), Mental Retardation Authorities (MRAs), Regional and Local Services, and the Guardianship Program.

Vision: Older Texans and persons with disabilities have easy access to and choose from a comprehensive array of services and supports that meet diverse needs, delivered through a partnership of public and private entities coordinating state and local resources.

Mission: To establish and maintain a locally based, unified system of access to a comprehensive and coordinated continuum of community services and supports for older Texans and persons with disabilities, allowing them to live independent and productive lives.

Area Agencies on Aging Section

The Department of Aging and Disability Services (DADS) is designated as the State Unit on Aging, and as such, is the single state agency responsible for administering programs and services under the federal Older Americans Act (OAA). To ensure the mandates of the OAA are met, the Area Agencies on Aging (AAA) Section of the Access and Intake Division is responsible for allocating funds and administering programs and services. Through performance contracts with DADS, a network of 28 AAAs provides services in all 254 counties. Funding to AAAs is allocated through a federally approved intrastate funding formula. The funding that is allocated supports services for persons 60 years of age and older, their family members, and other caregivers.

The OAA authorizes a variety of services to support older persons, their family members and other caregivers. Based on the local needs of older individuals within their service region, AAAs provide nutrition, in-home and other support services, as well as services specifically targeted for informal caregivers. A primary function for AAAs is providing access and assistance services that help older persons, their family members and other caregivers receive the information and assistance they need in obtaining community services, both public and private, formal and informal.

Age is the sole eligibility criteria under the OAA. However, the OAA does require AAAs target services to individuals who reside in rural areas; older individuals with greatest economic need (with particular attention to low-income minority individuals); and older

individuals with greatest social need (physical and mental disabilities, language barriers, cultural, social or geographical isolation).

The goal of the AAA Section of DADS Access and Intake Division is to ensure a comprehensive array of services is available and easily accessible, and that AAAs meet all applicable state and federal requirements. To meet its goal, Section functions are divided between two units. These include Local Procedure Development and Support and Contract Accountability and Oversight.

Mental Retardation Authorities Section

This section provides oversight for entities recognized by DADS. Most of these same entities are also Mental Health Authorities (MHAs). MRAs are generally community mental health and mental retardation (MHMR) centers. Community MHMR Centers are governed by local boards of directors appointed by local taxing authorities such as cities, counties, independent school districts, hospital districts and any combination of these authorities. Centers are recognized in statue as an agency of the state, a governmental unity and a unit of local government.

Some of these community centers were created in the early 1960s as a response to federal enabling legislation passed during the Kennedy Administration. In Texas today, these centers cover all 254 counties.

The Department holds a performance contract with each of these entities to provide community based mental retardation services and to assist consumers and families with access to other Medicaid funded services. These services primarily include community Intermediate Care Facilities for Person with Mental Retardation (ICF/MR) facilities, Home and Community Support (HCS), Texas Home Living Waiver Services (TxHmL), state mental retardation facilities and other available services and supports.

The MRA Section of Access and Intake develops policy and procedure, and contracts with and oversees MRAs and the services provided. The Section also oversees the ongoing enrollment of consumers into community ICF/MR facilities, HCS and TxHmL waivers, and the annual renewal of consumer levels of need, plans of care and other requirements regarding enrollment in these programs.

Regional and Local Services Section

The mission of Regional and Local Services is to maintain existing supports for longterm care services, programs and field operations while partnering with other DADS programs and stakeholders to design an integrated service delivery system that will streamline the eligibility, enrollment and delivery of services. Staff in the Local Procedure Development and Support unit develops policies, procedures, rules and curricula to support regional field staff in their delivery of intake, eligibility, enrollment, and case management services for long-term care service programs administered by DADS. These programs include a broad range of community care services: Medicaid and Medicaid waiver programs such as Community Based Alternatives (CBA), Consumer Managed Personal Assistance Services (CMPAS), Primary Home Care (PHC), Day Activity and Health Services (DAHS), and the Medically Dependent Children's Program (MDCP). These are funded out of a combination of Title XIX, Medicaid waiver, Social Services Block Grant (Title XX), and state matching funds.

These programs provide a range of home and community-based services to aged and disabled adults as alternatives to institutional care in nursing facilities. Activities can include personal assistance with daily living activities, home management such as laundry, shopping and housekeeping, adult day care, and services such as adaptive aids, minor home modifications and respite to support families caring for children who are medically dependent.

Staff in the Program Enrollment Unit provides liaison services to regional staff. They also participate in the Texas Integrated Eligibility Redesign System (TIERS), a multi-year project designed to create a state-of-the-art, web-based eligibility determination system for HHS programs. Liaison activities include coordination and oversight of long-term care services field staff that are responsible for the functional assessment and placement of eligible individuals in long-term care services and supports.

Guardianship Program

Guardianship is a legal method to protect individuals' well being when they cannot protect themselves. A guardian is a court-appointed person or entity that makes decision on behalf of an incapacitated person. Chapter 13 of the Probate Code defines the purpose, laws and responsibilities of a guardian. Depending upon the powers granted by the court, guardianship responsibilities include, but are not limited to,

- managing estates;
- making medical decisions; and
- arranging for placement in facilities, such as long-term care facilities, hospitals or foster homes.

The purpose of the Guardianship Program is to provide guardianship services, either directly or through contracts with local entities. When all other options have been exhausted and no family member, other interested party, or alternative is available, the State may seek, as a last resort, guardianship of an:

- Incapacitated children reaching adulthood in Child Protective Services (CPS) conservatorship as defined in the Human Resource Code Chapter 48.209(a); or
- Incapacitated adults in Adult Protective Services (APS) investigations in which abuse, neglect, or exploitation has been confirmed and there are no other means of protecting the person as defined in the Human Resource Code Chapter 48.209(b).

On December 1, 2004, the Executive Commissioner of the Health and Human Services Commission (HHSC) transferred the <u>management</u> of the Guardianship Program from the Department of Family Protective Services (DFPS), Division of Adult Protective Services (APS) to the Department of Aging and Disability Services (DADS), Division of Access and Intake. This transfer was in response to the Health and Human Services Commission's final report related to adult protective services in Texas.

A memorandum of understanding was signed by the Commissioners of DFPS and DADS to transfer the guardianship specialists, supervisors, and accountants to DADS. It further outlines the roles and responsibilities of both agencies regarding referrals for guardianship assessment and responsibilities.

Regional and Local Services

Adult Foster Care (AFC)

Service Description

Adult Foster Care (AFC) provides a 24-hour living arrangement with supervision in an adult foster home for persons who, because of physical, mental, or emotional limitations, are unable to continue independent functioning in their own homes.

Providers of AFC must live in the household and share a common living area with the consumers. With the exception of family members, no more than three adults may live in the foster home unless the Department of Aging and Disability Services licenses it.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

Services may include:

- minimal help with personal care;
- help with activities of daily living; and
- provision of or arrangement for transportation.

The consumer pays the provider for room and board.

Consumer Eligibility

- Age: 18 years of age or older
- Income: Medicaid recipient or not exceed:
 - \$2,022 per month for an individual
 - \$4,044 per month for a couple
- **Resources:** \$5,000 or less for an individual or \$6,000 or less for a couple
- Functional Assessment Score: Minimum score of 18

Provider Base

Individual providers

Service Availability

Statewide in every region; not available in all counties

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – Facility Enrollment Department of Aging and Disability Services Mail Code E-349 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2723

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Community Attendant Services (CAS) (For Adults and Children)

Service Description

Community Attendant Services (CAS) is a non-technical, medically related personal care service. CAS is available to eligible **adults and children** whose health problems cause them to be functionally limited in performing activities of daily living according to a practitioner's statement of medical need.

CAS services are provided by an attendant.

Funding Sources

Title XIX

Covered Services

- **Escort:** Accompanying the consumer on trips to obtain medical diagnosis or treatment or both. Additional time may not be allocated for escort services for other purposes. This service does not include the direct transportation of the consumer by the attendant.
- **Home Management:** Assistance with housekeeping activities that support the consumer's health and safety, including the following:
 - o changing bed linens
 - o housekeeping
 - o laundry
 - o shopping
 - o storing purchased items
 - o washing dishes
- Personal Care: Assistance with activities related to the care of the consumer's physical health, including the following:
 - o bathing
 - o dressing
 - o **grooming**
 - o routine hair and skin care
 - o preparing meals
 - o feeding
 - o **exercising**
 - o helping with self-administered medication
 - o toileting
 - o transferring/ambulating

Consumer Eligibility

- Age: No limit both adults and children may apply for CAS
- Income: Medicaid eligible or CAS eligible. To be CAS eligible, limits are:
 - o \$2,022 per month for an individual
 - \$4,044 per month for a couple
- **Resources:** \$2,000 or less for an individual or \$3,000 or less for a couple

Functional Assessment Score/Eligibility:

- o Minimum score of 24
- Functional limitation with at least one personal care task based on medical condition
- o Practitioner's statement of medical need

Unmet Need: For home management and personal care task(s)

Service Maximum

Consumers can receive:

- 50 hours per week; or
- 42 hours per week if receive Priority Status.

Provider Base

Home and Community Support Services Agencies

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – HCSSA Department of Aging and Disability Services Mail Code E-217 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2213

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues / Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Community Based Alternatives (CBA)

Service Description

The Community Based Alternatives (CBA) program provides home and community-based services to aged and disabled adults as cost-effective alternatives to institutional care in nursing facilities.

Funding Sources

Title XIX Medicaid 1915(c) Home and Community-Based Services Waiver, and State Funds

Covered Services

Case Management is provided by DADS staff.

Services include:

- Adaptive Aids and Medical Supplies
- Adult Foster Care
- Assisted Living / Residential Care Services
- Consumer Directed Services
- Emergency Response Services
- Home Delivered Meals
- Minor Home Modifications
- Nursing Services
- Occupational Therapy Services
- Personal Assistance Services
- Physical Therapy Services
- Respite Care Services
- Speech and/or Language Pathology Services
- Prescription drugs, if not covered through Medicare
- Transition Assistance Services

(See CBA Terminology for more information)

Consumer Eligibility

- Age: 21 years of age or older
- Income / Resources: Be Medicaid eligible in the community under:
 - o SSI; or
 - o Medical Assistance Only (MAO) protected status; or

- Meet the income and resource requirements for Medicaid benefits in nursing facilities (\$2,022 per month with resources of \$2,000 for an individual. Spousal impoverishment provisions apply).
- Individual Service Plan: Cost of applicant's service plan cannot exceed the nursing facility payment rate.
- Informed Choice: Choose waiver services instead of nursing facility care based on an informed choice.
- Medical Necessity: Meet the medical necessity determination for nursing facility care.
- **Risk Assessment:** Be determined at risk for nursing facility placement using the Resident Assessment Instrument for Home Care (RAI-HC).

Service Maximum

The individual's service plan cannot exceed 200 percent of the individual's Resource Utilization Group (RUG) payment rate for initial entry into CBA.

Provider Base

Adult Foster Care Providers Assisted Living / Residential Care Providers Emergency Response Providers Home Delivered Meals Providers Home and Community Support Services Providers Transition Assistance Services Providers

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – HCSSA Department of Aging and Disability Services Mail Code E-217 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2213

Regulatory – Facility Enrollment Department of Aging and Disability Services Mail Code E-349 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2723

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

CBA Terminology

- Adaptive Aids and Medical Supplies Devices, controls or medically necessary supplies which enable persons with functional impairments to perform activities of daily living or control the environment in which they live.
- Adult Foster Care A 24-hour living arrangement in an enrolled DADS foster home for persons who, because of physical or mental limitations, are unable to continue residing in their own home. Services may include meal preparation, housekeeping, personal care, help with activities of daily living, supervision and the provision of or arrangements for transportation.
- Assisted Living Services / Residential Care Services A 24-hour living arrangement in licensed personal care homes in which personal care, home management, escort, social and recreational activities, 24-hour supervision, supervision of, assistance with or direct administration of medication, and transportation are provided.
- Consumer Directed Services An option that provides participants the option to direct and manage their providers of personal assistance services and respite services.
- Emergency Response Services An electronic monitoring system for use by functionally impaired individuals who live alone or are isolated in the community. In an emergency, the consumer can press a call button to signal for help. The electronic monitoring system, which has 24-hour, seven-day-a-week capability, helps insure that the appropriate persons or service agency respond to an alarm call from the participant.
- Home Delivered Meals Provide nutritious meals served in the consumer's home.
- Minor Home Modifications Services, which assess the need for, arrange for, and provide modification and/or improvements to an individual's residence to enable him/her to reside in the community and to ensure safety, security, and accessibility.
- Nursing Services Includes, but is not limited to, the assessment and evaluation of health problems and the direct delivery of nursing tasks, providing treatments and health care procedures ordered by a physician and/or required by a physician and/or required by standards of professional practice or state law, delegation of nursing tasks to unlicensed personnel according to state rules promulgated by the Texas Board of Nurse Examiners, participating on the Interdisciplinary Team, developing the health care plan, and teaching individuals about proper health maintenance.
- Occupational Therapy Services The full range of activities provided by an occupational therapist, or a licensed occupational therapy assistant under the direction of a licensed occupational therapist, within the scope of his state licensure.

- Personal Assistance Services Assistance to consumer including assistance with the performance of the activities of daily living and household chores necessary to maintain the home in a clean, sanitary, and safe environment. Persons receiving Personal Assistance Services live in the community in settings other than Adult Foster Care homes or Assisted Living settings. The level of assistance provided is determined by the consumer's needs for assistance and the plans of care. Personal Assistance Services may include the provision of health-related tasks delegated by a registered nurse in accordance with state rules promulgated by the Texas Board of Nurse Examiners and protective supervision.
- Physical Therapy Services The full range of activities provided by a physical therapist or a licensed physical therapy assistant, under the direction of a licensed physical therapist, within the scope of his state licensure.
- Respite Care Services Temporary relief to persons caring for functionally impaired adults in community settings other than Adult Foster Care or licensed personal care homes. Respite services are provided on an in-home basis and out-of-home basis and are limited to 30 days per year. Room and board is included in the waiver payment for out-of-home settings.
- Speech and/or Language Pathology Services The full range of activities provided by speech and language pathologists under the scope of their state licensure.
- Transition Assistance Services (TAS) A service provided to Medicaid eligible Texas nursing facility residents to assist in transitions from the nursing facility into the community.

TAS is available to set up a household for a Medicaid consumer being discharged from a nursing facility under Money Follows the Person provisions. A nursing facility resident certified for waiver services may receive a one-time TAS authorization up to \$2,500.00 if the case manager determines that no other resources are available to pay for the basic services/items needed by the consumer. TAS is delivered by a contracted TAS agency that will receive a one-time fee of \$156.00. TAS services can include, but are not limited to:

- payment of security deposits required to lease an apartment or home, or to establish utility services for the home;
- o purchase of essential furnishings for the apartment or home;
- payment of moving expenses required to move into or occupy the home or apartment; and
- payment for site preparation services, such as pest eradication, allergen control, or a one-time cleaning before occupancy.

Community Living Assistance and Support Services (CLASS)

Service Description

The Community Living Assistance and Support Services (CLASS) program provides home and community-based services to adults and children with related conditions as a cost-effective alternative to ICF-MR/RC institutional placement. People with related conditions have a qualifying disability, other than mental retardation, which originated before age 22 and which affects their ability to function in daily life.

Funding Sources

Title XIX Medicaid 1915(c) Home and Community-Based Services Waiver, and State Funds

Covered Services

Services include:

- Adaptive Aids and Medical Supplies
- Case Management
- Consumer Directed Services
- Habilitation
- Minor Home Modifications
- Nursing Services
- Occupational Therapy
- Physical Therapy
- Prescription Drugs, if not covered through Medicare
- Psychological Services
- Respite Care
- Specialized Therapies
- Speech Pathology
- Transition Assistance Services

Consumer Eligibility

- Age: No limit (but age of onset of disability must be prior to age 22).
- Income and Resources: The applicant must be Medicaid eligible in the community under:
 - o SSI; or
 - Medical Assistance Only (MAO) protected status; or
 - Meet the income and resource requirements for Medicaid benefits in nursing facilities. (\$2,022 per month with resources of \$2,000 for an individual. Spousal impoverishment provisions apply.)
 - A disabled child who would be eligible for Medicaid if institutionalized and if parental income is not deemed to the child.

Additional Criteria:

The individual must also:

- have Individual Service Plan (ISP) for waiver services approved by DADS that does not exceed 200% of the cost of ICF-MR/RC institutional care;
- meet the institutional Level-of-Care (LOC) criteria for Intermediate Care Facilities for people with Mental Retardation/Related Conditions (ICF-MR/RC) LOC VIII;
- have a demonstrated need for ongoing habilitation services and case management.

Provider Base

Public and private agencies; each participant selects a Case Management Agency (CMA) for case management services and a Direct Services Agency (DSA) for other direct services available through the waiver. A Consumer-Directed Services (CDS) Agency may be chosen by the participant to provide support and assistance to individuals electing to direct their own employees for habilitation and respite services.

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5135

How to Apply for Services

Community Services Interest List Unit Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Fax Number 512-438-3549 Toll-free Number 1-877-438-5658

Consolidated Waiver Program (CWP)

(For Adults and Children)

Service Description

The Consolidated Waiver Program (CWP) is a Medicaid waiver program that began operations in Bexar County in November 2001. DADS staff provides case management. The CWP provides home and community-based services to people who are eligible for nursing facility care or Intermediate Care Facility for a person with Mental Retardation or a Related Condition (ICF-MR/RC) as a cost-effective alternative to institutional placement.

Funding Sources

Title XIX (Medicaid 1915(c) Home and Community-Based Services waiver) and State Funds

Covered Services

Services Include:

- Adaptive Aids and Medical Supplies
- Adult Foster Care
- Assisted Living / Residential Care
- Audiology
- Behavior Communication Specialist
- Child Support Services
- Consumer Directed Services
- Dental
- Dietary Services
- Emergency Response Service
- Family Surrogate Services
- Habilitation (residential, day, supported employment, and prevocational)
- Home Delivered Meals
- Independent Advocacy
- Intervener Services
- Minor Home Modifications
- Nursing Services
- Orientation and Mobility Services
- Personal Assistance Services
- Prescribed Drugs, if not covered through Medicare
- Psychological
- Respite (In and Out-of-Home)
- Social Work
- Therapies (physical, occupational, and speech / language pathology)
- Transportation
- 24-Hour Residential Habilitation
- Transition Assistance Services

Consumer Eligibility

- Age: No limit
- Income and Resources: The applicant must be Medicaid eligible in the community under:
 - o SSI; or
 - Medical Assistance Only (MAO) protected status; or
 - Meet the income and resource requirements for Medicaid benefits in nursing facilities; (\$2,022 per month with resources of \$2,000 for an individual. Spousal impoverishment provisions apply.); or
 - As a disabled child who would be eligible for Medicaid if institutionalized and if parental income is not deemed to the child.
- Individual Service Plan: Must be developed by a DADS case manager through a person-directed planning process in conjunction with the individual and other persons.
- Informed Choice: Choose waiver services instead of institutional care based on an informed choice.
- Interest List: Currently on an interest list in Bexar County for CBA, CLASS, DB-MD, MDCP or HCS.
- Level-of-Care: Must meet the institutional LOC criteria for ICF-MR/RC LOC I or LOC VIII. The Individual Services Plan cannot exceed 125% of the average aggregate cost of ICF-MR/RC institutional care.
- Medical Necessity: Must meet the institutional LOC for medical necessity determination for nursing facility services. The Individual Service Plan cannot exceed 150% of the nursing facility payment rate.
- **Residency:** Reside in Bexar County

Provider Base

- Adult Foster Care Providers
- Assisted Living / Residential Care Providers
- Emergency Response Providers
- Family Surrogate Service Providers
- Home Delivered Meals Providers
- Home and Community Support Services Providers
- Independent Advocacy Providers
- Out of Home Respite Providers
- Transition Assistance Services Providers

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Consumer Managed Personal Assistant Services (CMPAS)

Service Description

Personal assistance services are provided to consumers with physical disabilities who are mentally competent and willing to supervise their attendant or who have someone who can provide that supervision. Consumers interview, select, train, supervise, and release their personal assistants. Licensed Personal Assistance Service agencies determine eligibility and the amount of care needed, develop a pool of potential personal assistants and provide emergency back-up personal assistants.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

Personal assistance provided as needed by personal assistants selected and supervised by the consumer. Health-related tasks prescribed by physician.

Consumer Eligibility

- Age: 18 years of age or older
- **Income:** Sliding fee when income is greater than \$1,911 per month for an individual.
- **Personal care task:** Must need at least one personal care task.
- **Personal skill:** Must be mentally and emotionally capable of self-directing the care.
- **Physical disability:** Disability must be expected to last at least six months from the date eligibility is determined.

Service Maximum

Varies according to contracted unit rate. Reimbursement cannot exceed the nursing facility weighted average cost.

Provider Base

May include local governments, home and community support service agencies, or independent living centers.

Service Availability

Various counties in eight regions (See attached chart). An interest list exists in all regions.

Contact for Provider Policy and Consumer Eligibility

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Region 01: Lubbock Potter Randall	Region 03: Collins Dallas Denton Ellis Hood Johnson Kaufman Parker Rockwall Tarrant Wise	Region 05: Angelina Hardin Jasper Jefferson Nacogdoches Newton Orange Shelby	Region 06: Fort Bend Harris Montgomery	Region 07: Travis County
Region 08: Atascosa Bexar Comal Guadalupe Kendall Medina Wilson	Region 10: El Paso	Region 11: All Counties		

CMPAS Service Areas

Day Activity and Health Services (DAHS)

Service Description

Day Activity and Health Services (DAHS) facilities provide daytime services Monday through Friday to consumers residing in the community in order to provide an alternative to placement in nursing homes or other institutions. Services are designed to address the physical, mental, medical, and social needs of consumers.

Funding Sources

Title XIX, State Funds, and Social Services Block Grant (Title XX)

Covered Services

Services include:

- Noon meal and snacks
- Nursing and personal care
- Physical rehabilitation
- Social, educational, and recreational activities
- Transportation

Consumer Eligibility

- Age:
 - For Title XIX: No age limit
 - For Title XX: 18 years of age or older
- Income: For Title XIX: Must be a Medicaid recipient For Title XX: \$2,022 per month for an individual \$4,044 per month for a couple
- Resources: \$5,000 or less for an individual if not SSI eligible or \$6,000 or less for a couple if not SSI eligible

• Other Requirements:

- o A functional disability related to medical diagnosis.
- Medical diagnosis and physician's orders requiring care or supervision by a licensed nurse.
- Prior approval granted by a Regional Nurse.
- \circ $\,$ The need for assistance with one or more personal care tasks.

Service Maximum

10 units per week (5 days)

Provider Base

Licensed adult day care facilities

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – Facility Enrollment Department of Aging and Disability Services Mail Code E-349 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2723

Contact for Contracting Information

Community Services – Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Deaf-Blind with Multiple Disabilities (DB-MD)

Service Description

This Medicaid waiver program provides home and community-based services to people who are Deaf Blind with Multiple Disabilities (DBMD) as a cost-effective alternative to ICF-MR/RC institutional placement. The DBMD program focuses on increasing opportunities for consumers to communicate and interact with their environment.

Funding Sources

Title XIX Medicaid 1915(c) Home and Community Based Services Waiver and State Funds

Covered Services

Services include:

- Adaptive Aids and Medical Supplies
- Assisted Living (licensed up to 6 beds)
- Behavioral Support Services
- Case Management
- Chore Provider
- Consumer Directed Services
- Environmental Accessibility
- Habilitation
- Intervener
- Nursing Services
- Occupational Therapy
- Orientation and Mobility
- Physical Therapy
- Prescription Drugs, if not covered through Medicare
- Respite Care
- Speech Therapy
- Employment Assistance
- Supported Employment
- Dental treatment
- Transition Assistance Services

Consumer Eligibility

- Age: 18 years of age or older
- Income and Resources: The applicant must be Medicaid eligible in the community under:
 - o SSI; or

- o Medical Assistance Only (MAO) protected status; or
- Meet the income and resource requirements for Medicaid benefits in nursing facilities. (\$2,022 per month with resources of \$2,000 for an individual. Spousal impoverishment provisions apply.)
- **Deaf-Blindness:** Have Deaf-Blindness with a third disability resulting in a demonstrated need for one or more service on a monthly basis.
- Individual Plan of Care: The applicant's individual plan of care cannot exceed 200% of the cost of ICF-MR/RC institutional care.
- Informed Choice: Choose waiver services instead of institutional care based on an informed choice.
- Level-of-Care: Meet the institutional LOC criteria for ICF-MR/RC LOC VIII.

Service Maximum

There is an individual consumer cost ceiling based on 200% of the average cost of receiving services in an ICF-MR/RC facility.

Provider Base

Public and private agencies

Service Areas

Statewide availability. As this is a low incidence population, there are currently 41 counties in which individuals are currently served.

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2622 Fax Number 512-438-5135

How to Apply for Services

Contact the Policy Development and Support unit or call 1-877-438-5658 and ask for the DBMD Waiver.

Emergency Response Services (ERS)

Service Description

Emergency Response Services (ERS) are provided through an electronic monitoring system used by functionally impaired adults who live alone or who are socially isolated in the community. In an emergency, the consumer can press a call button to signal for help. The electronic monitoring system, which has a 24hour, seven-day-a-week monitoring capability, helps to ensure that the appropriate person or service agency responds to an alarm call from a consumer.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

An electronic monitoring system that the consumer can use to signal for help in case of an emergency.

Consumer Eligibility

- Age: 18 years of age or older
- Income: Medicaid recipient or not exceeding:
 - o \$2,022 per month for an individual
 - \$4,044 per month for a couple
- Resources:
 - \$5,000 or less for an individual
 - \$6,000 or less for a couple
- Functional Assessment Score: Minimum score of 20

Additional Requirements:

- Have a telephone with a private line, if the system requires a private line to function properly.
- Be alone routinely for eight or more hours per day.
- Have the mental capacity to operate the equipment.
- Be willing to sign a release statement that allows the responder to make a force entry into the consumer's home if he is asked to respond to an activated alarm call and has no other means of entering the home to respond.

Provider Base

Public agencies or private non-profit or profit corporations that are either chartered with or authorized by the Secretary of State to transact business within the state and have a 24-hour, seven-day-a-week emergency response monitoring capability. Providers must meet licensure requirements of the Texas Board of Private Investigators and Private Security Agencies.

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Family Care (FC) Services

Service Description

Family Care (FC) is a non-skilled, non-technical attendant care service available to eligible adults who are functionally limited in performing activities of daily living.

PHC provider agencies have the option of providing Family Care services.

Family Care services are provided by an attendant and do not require the supervision of a registered nurse.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

- **Escort**: Accompanying the consumer on trips to obtain medical diagnosis or treatment or both. This service does not include the direct transportation of the consumer by the attendant.
- Home Management: Assistance with housekeeping activities that support the consumer's health and safety, including the following:
 - o changing bed linens
 - o housekeeping
 - o laundry
 - o shopping
 - o storing purchased items
 - o washing dishes
- **Personal Care**: Assistance with activities related to the care of the consumer's physical health, including the following:
 - o **bathing**
 - o dressing
 - o grooming
 - o routine hair and skin care
 - o preparing meals
 - o feeding
 - o exercising
 - helping with self-administered medication
 - o toileting
 - o transferring/ambulating

Consumer Eligibility

- Age: 18 years of age or older
- Income: Medicaid recipient or not exceeding:
 - o \$2,022 per month for an individual
 - o \$4,044 per month for a couple
- Resources:
 - o \$5,000 or less for an individual
 - \$6,000 or less for a couple
- Functional Assessment Score: Minimum score or 24
- **Unmet Need:** For home management and/or personal care task(s)

Service Maximum

Consumers can receive:

- 50 hours per week; or
- 42 hours per week if receive Priority Status.

Provider Base

Home and Community Support Services Agencies

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – HCSSA Department of Aging and Disability Services Mail Code E-217 P. O. Box 149030

Community Options

Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2213

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Home Delivered Meals Services (HDM)

Service Description

The Home Delivered Meals program provides a nutritious meal delivered to the consumer's home to ensure he or she gets at least one healthy meal per day.

Funding Sources

Social Services Block Grant (Title XX), Local Resources, State Funds, and Contractor Match

Covered Services

Meals delivered to the home

Consumer Eligibility

- Age: 18 years of age or older
- **Income:** Medicaid recipient or not exceeding:
 - \$2,022 per month for an individual
 - \$4,044 per month for a couple
- Resources:
 - \$5,000 or less for an individual
 - \$6,000 or less for a couple
- Functional Assessment Score: Minimum score of 20
- Consumer must be functionally limited in preparing meals.

Provider Base

Local community agencies, private and public agencies, and Area Agencies on Aging

Service Availability

Statewide in every region. Other resources, such as the Area Agencies on Aging meals program, are considered as contracts are developed.

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

Hospice Services

Service Description

A program of palliative care consisting of medical, social, and support services to a six-month physician-prognoses, terminally ill patient, when curative treatment is no longer possible.

Funding Sources

Title XIX and State Funds

Covered Services

Services include:

- Bereavement Counseling
- Counseling Services
- Drugs and Biologicals
- General Inpatient Care (short-term)
- Home Health Aide Services
- Homemaker Services
- Household Services
- Medical Appliances and Supplies
- Medical Social Services
- Nursing Care Services
- Occupational Therapy
- Physical therapy
- Physician Services
- Respite Care
- Speech Language Pathology
- Volunteer Services

Consumer Eligibility

- All Medicaid eligible recipients.
- Hospice recipients must sign a statement voluntarily electing the Hospice Program in lieu of services through other Medicaid programs.
- Physician's prognosis of six-months or less to live if the terminal illness runs its normal course.

Service Maximum

Physician certification for hospice care is given in six-month increments of time.

Provider Base

State licensed hospice agencies that are Medicare certified as hospice agencies. In order to receive Medicaid payments, the Medicare hospice providers must have a Medicaid contract with DADS.

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-5391 Fax Number 512-438-5133

Contact for Licensure

Home and Community Support Services Department of Aging and Disability Services Regulatory Mail Code E-342 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2183 Fax Number 512-438-2213

Contact for Contracting Information

Facility Enrollment Department of Aging and Disability Services Mail Code W-342 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2546 Fax Number 512-438-2730

Contact for Billing, Payment and Eligibility Paperwork

Provider Claims Services Department of Aging and Disability Services Mail Code Y-948 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-490-4666 Fax Number 512-490-4667 Itccms@dads.state.tx.us

How to Apply for Services

Contact your local DADS office. The web site to locate the office is:

http://www.dads.state.tx.us/services/contact.cfm

In-Home and Family Support Program (IHFSP)

(For Adults and Children Age 4 or Older)

Service Description

Direct grant benefits to individuals with physical disabilities and/or their families to purchase services that enable them to live in the community. Eligible individuals are empowered to choose and purchase services that help them to remain in their own home.

Funding Source

State Funds

Covered Services

Services include:

- Attendant care, home health services, home health aide services, homemaker services, chore services that provide assistance with training, routine body functions, dressing, preparing and consuming food, and ambulating.
- Counseling and training programs that help provide proper care of an individual with a disability.
- Medical, surgical, therapeutic, diagnostic and other health services related to a person's disability.
- Other disability related services prior-approved by DADS.
- Pre-approved transportation and room and board cost incurred by person with physical disability or his family during evaluation or treatment.
- Purchase or lease of special equipment or architectural modifications of a home to facilitate the care, treatment therapy, or general living conditions of a person with a disability.
- Respite care
- Transportation services

Consumer Eligibility

- Age: 4 years of age or older
- **Income:** Co-payment schedule begins at 105% of the state median income for household size.
- **Disability:** Physical disability which substantially limits the individual's ability to function independently.

Service Maximum

Maximum grant total of \$1,200 per year

Service Availability

Statewide. Interest list in all areas.

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How To Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Integrated Care Management (ICM)

Description

Integrated Care Management (ICM) is a primary care case management model of Medicaid managed care. ICM program objectives are to:

- integrate acute care and long term services and supports (LTSS);
- improve health and social outcomes;
- improve access to care; and
- constrain health care costs.

ICM is administered by the Texas Health and Human Services Commission (HHSC) and is designed to manage and coordinate acute care and long term services and supports (LTSS) for the eligible Supplemental Security Income (SSI), SSI-related and Medical Assistance Only (MAO) Medicaid population.

HHSC contracts with an ICM managed care plan that manages and coordinates these services for eligible ICM members. The ICM contractor is responsible for administrative services related to utilization and service coordination, including the authorization and management of Medicaid services; however, the ICM contractor is not responsible for approving LTSS service plans, paying claims, or setting rates.

HHSC operates the acute care components of ICM and DADS operates LTSS components of ICM. Long term services and supports available under ICM are:

- Day Activity and Health Services (DAHS),
- Primary Home Care (PHC), and
- 1915(c) nursing facility waiver (ICM Waiver) services.

In the ICM service areas, the ICM contractor's service coordinators perform most of the job duties previously performed by DADS case managers. DADS staff continue to enter ICM service authorizations into the Service Authorization System (SAS).

Service Descriptions

ICM members remain eligible for the full set of Medicaid benefits they received outside of ICM. In addition, they may qualify for the following long term services and supports:

The ICM DAHS program is very similar to the DAHS program that DADS operates in non-ICM service areas; however, in the ICM DAHS program, only Title XIX services are provided to eligible ICM members.

The ICM PHC program is offered to eligible adult ICM members and is the same as PHC services offered in non-ICM service areas. Community Attendant Services (CAS) and Family Care (FC) are outside the scope of ICM.

The ICM 1915(c) waiver offers the same array of services as the Community Based Alternatives (CBA) waiver offered in non- ICM service areas.

Funding Sources

ICM PHC: Title XIX

ICM DAHS: Title XIX

ICM Waiver: Title XIX Medicaid 1915(c) Home and Community-Based Services Waiver and State Funds

Covered Services

ICM PHC services include:

- Consumer Directed Services*
- Escort
- Home Management
- Personal Care

ICM DAHS include:

- Noon meal and snacks
- Nursing and personal care
- Physical rehabilitation
- Social, educational, and recreational activities
- Transportation

ICM Waiver services include:

- Adaptive Aids and Medical Supplies
- Adult Foster Care
- Assisted Living / Residential Care Services
- Consumer Directed Services*
- Dental Services
- Emergency Response Services
- Financial Management Services
- Home Delivered Meals
- Minor Home Modifications
- Nursing Services
- Occupational Therapy Services
- Personal Assistance Services
- Physical Therapy Services
- Respite Care Services

- Speech, Hearing, and Language Therapy Services
- Prescription drugs, if not covered through Medicare
- Therapy Services (Occupational, Physical, and Speech/Hearing/Language)
- Transition Assistance Services

* The **Consumer Directed Services** (CDS) option allows participants who live in their own private residences or the home of a family member to choose to self-direct certain services. By choosing to self-direct these services, participants will assume and retain responsibility to:

- o recruit their service providers;
- o conduct criminal history checks;
- o determine the competency of service providers; and
- hire, train, manage, and fire their service providers.

The CDS option in the ICM service area operates in the same way it does in a non-ICM service area.

Consumer Eligibility – ICM DAHS

- Age: No age limit
- **Income:** Must be a Medicaid recipient
- Other Requirements:
 - A functional disability related to medical diagnosis.
 - Medical diagnosis and physician's orders requiring care or supervision by a licensed nurse.
 - The need for assistance with one or more personal care tasks.

Consumer Eligibility – ICM PHC

- Age: Must be 21 years of age or older
- **Income:** Medicaid eligible
- Functional Assessment Score:
 - Minimum score of 24 on the standardized functional assessment instrument that DADS uses
 - Functional limitation with at least one personal care task based on medical condition
 - Practitioner's statement of medical need
- **Unmet Need:** For home management and personal care task(s)

Consumer Eligibility – ICM Waiver

- Age: Must be 21 years of age or older
- Income / Resources: Medicaid eligible in the community under:
 - \circ SSI; or
 - Medical Assistance Only (MAO) protected status; or
 - Meet the income and resource requirements for Medicaid benefits in nursing facilities (\$2,022 per month with resources of \$2,000 or less for an individual. Spousal impoverishment provisions apply).
- Individual Service Plan: The individual service plan (ISP) must be developed by an ICM service coordinator through a person-directed planning process in conjunction with the individual and other persons. The ISP cannot exceed 200% of the reimbursement rate that would have been paid for that same individual to receive services in a nursing facility.
- Informed Choice: The applicant must choose waiver services instead of nursing facility care based on an informed choice.
- Interest List: DADS maintains an ICM 1915(c) waiver interest list for MAO applicants who are 21 years of age and older and are not receiving any waiver services. Individuals on the interest list are not tested for Medicaid eligibility until there is an available space in the waiver program. MAO individuals who come off the interest list will be tested for Medicaid eligibility, both financial and medical necessity for nursing facility services, and if determined eligible, and in accordance with §48.1301 of this title, will be enrolled in the ICM program to receive waiver services.

SSI individuals are exempt from the ICM waiver interest list and are not required to wait for an opening in the ICM waiver program. Since these individuals are already ICM members, they can request an eligibility determination for ICM waiver services.

- **Medical Necessity:** Meet the medical necessity determination for nursing facility care.
- **Risk Assessment:** Be determined at risk for nursing facility placement using the Resident Assessment Instrument for Home Care (RAI-HC).

Provider Base – ICM DAHS

Licensed adult day care facilities

Provider Base – ICM PHC

Home and Community Support Services Agencies

Provider Base – ICM Waiver

Adult Foster Care Providers Assisted Living / Residential Care Providers Consumer Directed Services Agencies Emergency Response Providers Home Delivered Meals Providers Home and Community Support Services Providers Nursing Facilities (for out-of-home Respite Services) Pharmacies Transition Assistance Services Providers

Service Availability

ICM operates in the Dallas and Tarrant service areas. The **Dallas service area** consists of the following counties: Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall. The **Tarrant service area** consists of the following counties: Denton, Hood, Johnson, Parker, Tarrant, and Wise.

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3015 Fax Number 512-438-5133

Medically Dependent Children Program (MDCP)

(For Children Under Age 21)

Service Description

The Medically Dependent Children Program (MDCP) provides a variety of services to support families caring for children who are medically dependent and to encourage de-institutionalization of children in nursing facilities.

Funding Source

Title XIX (Medicaid 1915(c) Home and Community-Based Services waiver), and State Funds

Covered Services

- Adaptive Aids a device necessary to treat, rehabilitate, prevent, or compensate for conditions resulting in disability or loss of function. May include:
 - o environmental control units (e.g. voice activated light switches); and/or
 - medically necessary and appropriate adaptive aids not covered by other sources; and/or
 - o van or vehicle lifts.
- Adjunct Support Services a diverse array of approved, individualized, disability-related services that support:
 - o independent living;
 - o participation in child care; and
 - o participation in post-secondary education.
- Minor Home Modifications a physical modification to a home, which is necessary to prevent institutionalization or to support de-institutionalization. Examples include:
 - o bathroom modifications;
 - o doorway widening; and
 - o ramps.
- Respite –provides the primary caregiver(s) temporary relief from care during times when the caregiver would normally provide the care.
- Transition Assistance Services (TAS) a service provided to Medicaid eligible Texas nursing facility residents to assist in transitions from the nursing facility into the community.
- Financial Management Services A consumer directed services (CDS) agency provides financial management services.

Consumer Eligibility

- Age: Under 21 years of age
- Residence: Live in Texas
- Eligibility: A person meets the disability criteria if the person:
 1) received disability benefits from:
 - a) Supplemental Security Income;
 - b) federal old-age , survivors, and disability insurance; or
 - c) railroad retirement; or
 - 2) has a disability determination by HHSC

Consumer's Services

- Individual Plan of Care (IPC): The IPC is developed with the consumer and the caregiver(s), during the initial eligibility determination and annual eligibility renewal process.
- Informed Choice: Choose waiver services instead of nursing facility care based on informed choice. MDCP consumers have freedom of choice of provider and provider type.

Service Maximum

- **Cost Limit**: The cost limit is 50 percent of the reimbursement rate that would have been paid for that same individual to receive services in a nursing facility.
- RUG: The Resource Utilization Group (RUG) is calculated based on the Medical Necessity (MN) and Level of Care (LOC) assessment. RUG is a classification system used to determine cost limits for MDCP participants.

Provider Base

- Respite Providers
- Adjunct Support Services Providers
- Adaptive Aids Providers
- Minor Home Modification Providers
- Transition Assistance Services Providers
- Financial Management Services Providers

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Provider Enrollment Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3460 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

Contact for Interest List Information

Community Services Interest List Unit Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Fax Number 512-438-3549 Toll-free Number 1-877-438-5658

How to Apply for Services

Call 1-877-438-5658

Pre-Admission Screening and Resident Review (PASARR)

Service Description

The Omnibus Budget Reconciliation Act of 1987 (OBRA '87) requires that all people seeking entry into a nursing facility be pre-screened to identify individuals who have mental illness (MI), mental retardation (MR), and/or a related condition (RC). In addition, individuals already residing within facilities whose condition changes must be screened.

Funding Sources

Title XIX and State Funds

Covered Services

- Alternate Placement. All current residents of nursing facilities found to be inappropriately placed, who do not need nursing facility services, who do require specialized services, and who have not resided in a facility for 30 consecutive months must be alternately placed.
- **Appeal Hearings.** All individuals who are not satisfied with their PASARR determination have the right to a fair hearing to appeal the determination.
- Medical Necessity Determination. All consumers suspected of having mental illness (MI), mental retardation (MR) or a related condition (RC) must be screened by PASARR to determine if they require placement in a nursing facility.
- Rehabilitative Services. Speech, physical and occupational therapy, and durable medical equipment for adult PASARR consumers who meet the requirements for medical necessity and also need specialized services. Services must be pre-authorized.
- Special Assessments. Any time a PASARR consumer has a change in condition that may relate to the need for specialized services; a special reassessment must be requested.
- **Specialized Services.** All individuals identified as being MI, MR and/or RC, who currently reside in the nursing facility and need specialized services may receive a program of active treatment to be delivered within the facility.

Consumer Eligibility

All potential consumers who are planning to move to a partially federally funded nursing facility and who are suspected of having a mental illness, mental retardation or a related condition must receive a PASARR screening. PASARRs apply to every person with MI, MR or RC, even private pay consumers.

Provider Base

- For rehabilitative services: individual Medicaid rehabilitation providers.
- For psychological assessments: individual psychologists.
- For other specialized services: the mental retardation or mental health authorities.

Service Availability

Statewide

Contact for Provider Policy Information or Consumer Eligibility Issues/Questions

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Required Licensure

- Nursing Facility License
- Professional licensure as applicable
- Staff conducting assessments must meet the criteria to be a Qualified Mental Retardation Professional or Qualified Mental Health Professional as appropriate

Contact for Licensure

Regulatory – Facility Enrollment Department of Aging and Disability Services Mail Code E-349 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2723

Contact for Contracting Information

- For psychologists: Contact local DADS Regional Office
- For rehabilitation professionals: Contact TMHP

How to Get More Information about PASARR

A computer-based training course that provides an overview of PASARR can be accessed at: <u>http://www.dads.state.tx.us/business/CBT/index.html</u>

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Primary Home Care (PHC) (For Adults)

Service Description

Primary Home Care (PHC) is a non-technical, medically related personal care service. PHC is available to eligible adults whose health problems cause them to be functionally limited in performing activities of daily living according to a practitioner's statement of medical need.

PHC provider agencies also provide Family Care services. Family Care is also a non-skilled, non-technical service provided to eligible consumers who are functionally limited in performing daily activities.

PHC services are provided by an attendant.

Funding Sources

Title XIX and State Funds

Covered Services

- Escort: Accompanying the consumer on trips to obtain medical diagnosis or treatment or both. Additional time may not be allocated for escort services for other purposes. This service does not include the direct transportation of the consumer by the attendant.
- Home Management: Assistance with housekeeping activities that support the consumer's health and safety, including the following:
 - o changing bed linens
 - o housekeeping
 - o **laundry**
 - o **shopping**
 - storing purchased items
 - o washing dishes
- **Personal Care:** Assistance with activities related to the care of the consumer's physical health, including the following:
 - o **bathing**
 - o dressing
 - o grooming
 - o routine hair and skin care
 - o preparing meals
 - o **feeding**
 - o exercising

- helping with self-administered medication
- o toileting
- o transferring/ambulating

Consumer Eligibility

- Age: Must be 21 or older or receiving PHC through CAS eligibility.
- **Income:** Medicaid eligible or CAS eligible. To be CAS eligible, limits are:
 - \$2,022 per month for an individual
 - o \$4,044 per month for a couple
- **Resources:** \$2,000 or less for an individual or \$3,000 or less for a couple

Functional Assessment Score:

- Minimum score of 24
- Functional limitation with at least one personal care task based on medical condition
- Practitioner's statement of medical need

Unmet Need: For home management and personal care task(s)

Service Maximum

Consumers can receive:

- 50 hours per week; or
- 42 hours per week if receive Priority Status.

Provider Base

Home and Community Support Services Agencies

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – HCSSA Department of Aging and Disability Services Mail Code E-217 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2213

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: http://www.dads.state.tx.us/services/contact.cfm

Program of All-Inclusive Care for the Elderly (PACE)

Service Description

Provides community-based services to frail elderly people who qualify for nursing facility placement. Uses a comprehensive care approach, providing an array of services for a capitated monthly fee that is below the cost of comparable institutional care.

Funding Sources

Title XIX, State Funds, and private pay

Covered Services

Any and all health-related services needed including in-patient and outpatient medical care, specialty services like dentistry and podiatry, social services, inhome care, meals, transportation, day activity, and housing assistance.

Consumer Eligibility

Must meet the following criteria:

- Be over age 55 years of age
- Choose PACE services
- Qualify for a nursing facility LOC

Provider Base

One provider in El Paso and one provider in Amarillo

Service Availability

Designated areas of EI Paso and Amarillo/Canyon (See attached chart)

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

PACE CATCHMENT AREAS BY ZIP CODE

Amarillo/Canyon area:	El Paso area:
79015	79901
79101	79902
79102	79903
79103	79904
79104	79905
79106	79907
79107	79915
79108	79924
79109	79925
79110	79930
79111	79935
79118	79936
79119	
79121	
79124	

Residential Care (RC)

Service Description

The Residential Care (RC) program provides services to eligible adults who require access to care on a 24-hour basis but do not require daily nursing intervention. Services include, but are not limited to: personal care, home management, escort, 24-hour supervision, social and recreational activities, and transportation.

Services provided under the RC program are delivered through one of two arrangements: residential care and emergency care.

- **Residential Care** is a 24-hour living arrangement in which the consumer pays room and board and keeps a monthly allowance for personal and medical expenses. The remainder of his income is contributed to the total cost of his care.
- Emergency Care is a living arrangement that provides services to eligible consumers while case managers seek a permanent care arrangement. Emergency care consumers do not contribute toward the cost of their care. Emergency Care is not applicable in the CBA program.

Funding Source

Title XX

Consumer Eligibility

- Age:
 - 18 years of age or older for CCAD RC
 - o 21 years of age or older for CBA RC
- **Income:** Medicaid recipient or not exceed:
 - \$2,022 per month for an individual
 - \$4,044 per month for a couple
- **Resources:** \$5,000 or less for an individual or \$6,000 or less for a couple

Functional Assessment:

- Minimum score of 18 (for CCAD RC only)
- Have needs that do not exceed the facility's capability under its licensed capacity.

Provider Base

Facilities licensed as assisted living facilities.

Service Availability

Available in every region but not in every county

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Licensure

Regulatory – Facility Enrollment Department of Aging and Disability Services Mail Code E-349 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2633 Fax Number 512-438-2723

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

Community Options

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Special Services to Persons with Disabilities (SSPD)

Services Description

Special Services to Persons with Disabilities (SSPD) include services provided to Community consumers in a variety of settings. These services are designed to assist consumers in developing the skills needed to remain in the community as independently as possible.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

Counseling, personal care, and help with the development of skills needed for independent living in the community.

Consumer Eligibility

- Age: 18 years of age or older
- Income: Medicaid recipient or not exceeding:
 - \$2,022 per month for an individual
 - o \$4,044 per month for a couple
- Resources:
 - o \$5,000 or less for an individual
 - \$6,000 or less for a couple
- Functional Assessment Score: Minimum score of 9

Provider Base

Public agencies and non-profit organizations

Service Availability

Available in Regions 03, 04, and 07

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Contracting Information

Community Services - Contracting Department of Aging and Disability Services Mail Code W-517 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-2080 Fax Number 512-438-5522

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: http://www.dads.state.tx.us/services/contact.cfm

Special Services to Persons with Disabilities (SSPD-SAC)

24-Hour Shared Attendant Care (SAC)

Service Description

Special Services to Persons with Disabilities (SSPD) 24-Hour Shared Attendant Care (SAC) makes attendant care available to consumers on a 24-hour basis. Consumers live independently in clustered living arrangements and use this service to achieve habilitative or re-habilitative goals.

Funding Sources

Social Services Block Grant (Title XX) and State Funds

Covered Services

Around the clock availability of attendant care in a clustered living environment

Consumer Eligibility

- Age: 18 years of age and older
- Income: Medicaid recipient or not exceeding:
 - o \$2,022 per month for an individual
 - \$4,044 per month for a couple

Resources:

- o \$5,000 or less for an individual
- \$6,000 or less for a couple
- Functional Assessment Score: Minimum score of 9

Provider Base

Centers for independent living, home health agencies

Service Availability

Houston

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Contact for Consumer Eligibility Issues/Questions

Community Services Policy Department of Aging and Disability Services Mail Code W-351 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3436 Fax Number 512-438-2906

How to Apply for Services

Contact your local DADS office. The web site to locate the office is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Area Agencies on Aging Access & Assistance Services

Service Description

Access and assistance services provided by AAAs (directly and through contractor and vendor agreements) help older persons, their family members and/or other caregivers receive the information and assistance they need in locating and accessing community services, both public and private, formal and informal.

Funding Sources

Older Americans Act Titles III-B, VII-OAG and VII-EAP; State General Revenue; Centers for Medicare & Medicaid Services-Medicare Beneficiary Grant Funds.

Covered Services

- Information, Referral, and Assistance Assessing customers' needs; finding organizations capable of meeting the needs; evaluating all appropriate resources; providing enough information about each resource to help customers make informed choices; helping customers find alternative resources; actively linking people to needed services; and performing followup to ensure the services were provided.
- Benefits Counseling/Legal Assistance Assistance to older persons with obtaining information regarding public benefits, private benefits and a variety of community support programs. Benefits Counseling services include assisting older adults with understanding their rights, applying for benefits and receiving appropriate referrals, exercising choice, benefiting from services and opportunities authorized by law, and maintaining their rights, especially those individuals with reduced capacities. Consumer-protection issues are a major theme in benefits counselors' work, along with basic questions about rights, benefits, and entitlements.
- Legal Awareness The dissemination of accurate, timely and relevant information, eligibility criteria, requirements and procedures to older persons about public entitlements, health/long-term care, individual rights, planning/protection options, housing and consumer issues in a group setting.
- Care Coordination The assessment, effective planning, arranging, coordinating and following-up on services that most appropriately meet identified needs as mutually defined by AAA access and assistance staff, an older person, and where appropriate, a family member or other caregiver.

 Ombudsman Program – This program is administered by the Office of the State Long-term Care Ombudsman who works closely with the 28 local programs to advocate for the rights of residents and their families so they receive the highest quality of care in long-term care facilities. Specially trained staff and certified volunteers serve as advocates in 1,124 licensed facilities across the state.

Participant Eligibility

Services are provided to persons 60 years of age and older and are targeted to older individuals with greatest economic and social need, with particular attention to low-income minority older individuals and older individuals residing in rural areas. Additionally, family members and/or other caregivers may receive information and services on behalf of the older individual for whom they are providing care.

Provider Base

Area Agencies on Aging, Subcontractors and Vendors

Services Availability

Statewide. However, as service priorities and available resources vary across the state, individuals should contact their local AAA for information regarding services in their area.

Contact for Policy Information

Area Agencies on Aging Department of Aging and Disability Services Mail Code W-352 701 West 51st Street Austin, TX 78751 Phone Number (512) 438-4893 Fax Number (512) 438-4374

Contact for Subcontracting/ Vendor Information

Subcontracts and vendor agreements are established and managed by AAAs. Interested parties should contact their local AAA for request for proposal/open enrollment information. To find the proper Area Agency of Aging, access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

How to Apply for Services

Contact your AAA locally, or by dialing 1-800-252-9240 to be automatically connected to the AAA in your area.

Area Agencies on Aging Caregiver Support Services

Service Description

The Older Americans Act, National Family Caregiver Support Program (NFCSP) provides critical support needed by families to assist them in maintaining their caregiver roles. Under this program, informal caregivers are defined as:

- individuals caring for persons age 60 or older; and
- grandparents age 60 or older caring for a grandchild age 18 or younger.

While AAAs have historically provided services to caregivers, implementation of NFCSP has allowed AAAs to expand services available to caregivers.

Funding Sources

Older Americans Act Titles III-E, State General Revenue

Covered Services

- Information Information to caregivers about available services. Activities include partnership building and program development.
- Assistance Assistance to caregivers in gaining access to available services. Services under this category include access and assistance services described under the Access and Assistance program. In addition this program includes caregiver support coordination, described below:
 - Caregiver Support Coordination An ongoing process that include assessing the needs of a caregiver and care recipient, effectively planning, arranging, coordinating and following-up on services which most appropriately meet the identified needs as mutually defined by the caregiver, the care recipient and the access and assistance staff.
- Counseling and Support Groups Individual counseling, support groups, and caregiving education and training (described below) to assist in making decisions and solving problems relating to caregiving roles:
 - Caregiver Education and Training This includes developing a resource library, developing informational resources, developing and/or facilitating support groups, seminars and focus groups, facilitating individual or group counseling and providing educational services to groups or individuals.

 Supplemental Services – Supplemental services, on a limited basis, to complement the care provided by caregivers. Services provided under this category include transportation, emergency response, home delivered meals, homemaker, personal assistance, telephone reassurance, chore maintenance.

Participant Eligibility

In accordance with the Older Americans Act, any individual who is providing care for an individual age 60 and older or who is a grandparent age 60 and older and is providing primary care for a grandchild age 18 or younger is eligible to receive services. Many of the supplemental support services and respite services require an assessment to determine consumer impairment in their ability to perform activities of daily living and instrumental activities of daily living.

Provider Base

Area Agencies on Aging, Subcontractors and Vendors

Services Availability

Statewide. However, as service priorities and available resources vary across the state, individuals should contact their local AAA for information regarding services in their area.

Contact for Policy Information

Area Agencies on Aging Department of Aging and Disability Services Mail Code W-352 701 West 51st Street Austin, TX 78751 Phone Number (512) 438-4893 Fax Number (512) 438-4374

Contact for Subcontracting/ Vendor Information

Subcontracts and vendor agreements are established and managed by AAAs. Interested parties should contact their local AAA for request for proposal/open enrollment information. To find the proper Area Agency of Aging, access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

How to Apply for Services

Contact your AAA locally, or by dialing 1-800-252-9240 to be automatically connected to the AAA in your area.

Area Agencies on Aging In-Home Support Services

Service Description

Area Agencies on Aging (AAA), and the service providers with whom they establish contracts or vendor agreements, support a statewide system of supportive and in-home services. These services support a comprehensive, coordinated community-based system that results in a continuum of services for older individuals. It is the intent of the Older Americans Act that allocated funds be used as a catalyst in bringing together public/private and formal/informal resources in the community to assure the provision of a full-range of efficient, well coordinated and accessible services for older individuals.

Funding Sources

Older Americans Act Titles III-B, VII-EAP, State General Revenue, Housing Bond Fee Program Funds.

Covered Services

- Homemaker A service provided by trained and supervised homemakers involving the performance of housekeeping/home management, meal preparation and/or escort tasks and shopping assistance, provided to individuals who require assistance with these activities in their place of residence. The objective is to help the recipient sustain independent living in a safe and healthful home environment.
- Personal Assistance Assisting an older person that has difficulty performing a minimum of two activities of daily living identified through an assessment process, with tasks that an individual would typically perform if they were able. This covers hands-on assistance in all activities of daily living.
- Chore Maintenance Performing household chores such as heavy cleaning (e.g., scrubbing floors, washing walls, washing outside windows), moving heavy furniture, yard and walk maintenance, which an older person is unable to handle on their own and which do not require the services of a trained homemaker.
- Adult Day Care An array of services provided in a congregate, nonresidential setting to dependent older persons who need supervision but do not require institutionalization. These services may include any combination of social or recreational activities, health maintenance, transportation, meals and other supportive services.

- Residential Repair Services consisting of repairs or modifications of participant-occupied dwellings that improve the condition, enhance energy efficiency, structural integrity or are essential for the health and safety of the occupants.
- Health Maintenance The provision of services, prescription drugs, and/or durable medical equipment which will prevent, alleviate, and/or cure the onset of acute and/or chronic illness, increase awareness of special health needs, and/or improve the emotional well-being of an older individual. This includes the provision of services by a health professional other than "health screening/monitoring" or "mental health" services, and includes, but is not limited to, dental treatment, health education, home health services (nursing, physical, speech, or occupational therapy), or the provision of medications, glasses, dentures, hearing aides or grab bars.
- Health Screening/Monitoring Investigation or analysis by a medical or health professional to determine the need for a health service, including routine testing for blood pressure, hearing, vision, diabetes and anemia, or the periodic checking/monitoring of a known condition, such as monthly blood pressure checks for hypertension or hematocrit tests for anemia.
- Emergency Response Services provided to the homebound, frail older persons using an automatic monitoring system to link them to emergency medical services when their life or safety are in jeopardy. ERS services include the installation of the individual monitoring unit, training associated with the use of the system, periodic checking to ensure that the unit is functioning properly, equipment maintenance calls, response to an emergency call by a medical professional, paraprofessional or volunteer and follow-up with the participant.
- Instruction and Training Providing the experience and/or knowledge for participants or professionals working with participants, to acquire skills, in a formal, informal, individual or group setting.
- Transportation Designed to carry older persons from specific origin to specific destination upon request. Participants request the transportation service in advance of their need, usually twenty-four to forty-eight hours prior to the trip.
- Hospice An array of services provided either in the home or in a residential setting to older persons suffering from a terminal illness. Services include medical care under the supervision of a physician, counseling for the person and the family members and other supportive services.
- Senior Center Operations The operation of community facilities where persons aged 60 or older meet together to pursue mutual interests, receive

services and/or take part in activities that will enhance their quality of life, support their independence and encourage their continued involvement in and with the community.

Participant Eligibility

Services are provided to persons 60 years of age and older and are targeted to older individuals with greatest economic and social need, with particular attention to low-income minority older individuals and older individuals residing in rural areas. Many of the services under this category require an assessment to determine consumer impairment in their ability to perform activities of daily living and instrumental activities of daily living.

Provider Base

Area Agencies on Aging, Subcontractors and Vendors

Services Availability

Statewide. However, as service priorities and available resources vary across the state, individuals should contact their local AAA for information regarding services in their area.

Contact for Policy Information

Area Agencies on Aging Department of Aging and Disability Services Mail Code W-352 701 West 51st Street Austin, TX 78751 Phone Number (512) 438-4893 Fax Number (512) 438-4374

Contact for Subcontracting/ Vendor Information

Subcontracts and vendor agreements are established and managed by AAAs. Interested parties should contact their local AAA for request for proposal/open enrollment information. To find the proper Area Agency of Aging, access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

How to Apply for Services

Contact your AAA locally, or by dialing 1-800-252-9240 to be automatically connected to the AAA in your area.

Area Agencies on Aging Nutrition Services

Service Description

Area Agencies on Aging (AAA), and the service providers with whom they establish contracts or vendor agreements, support a statewide system of nutrition services. These services include congregate meals, home delivered meals, nutrition education, nutrition counseling and nutrition consultation.

Funding Sources

Older Americans Act Titles III-C1, III-C2 and Nutrition Services Incentive Program; State General Revenue

Covered Services

 Congregate Meals - A hot or other appropriate meal served to an eligible person which meets one-third (1/3) of the recommended dietary allowances (RDA) as established by the Food and Nutrition Board of the National Academy of Sciences - National Research Council and complies with the Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture, and which is served in a congregate setting.

There are two types of congregate meals:

- **Standard meal** the regular meal from the standard menu that is served to the majority or all of the participants.
- **Therapeutic meal or liquid supplement** a special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the participant by a dietician (e.g.,diabetic diet, renal diet, pureed diet, tube feeding).
- Home Delivered Meal A hot, cold, frozen, dried, canned or supplemental food (with a satisfactory storage life) which provides a minimum of one-third of the daily recommended dietary allowances (RDA) as established by the Food and Nutrition Board of the National Academy of Sciences National Research Council and complies with the Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture, and is delivered to an eligible person in his/her place of residence. The objective is to help the recipient sustain independent living in a safe and healthful environment.

There are two types of home delivered meals:

- **Standard meal** the regular meal from the standard menu that is served to the majority or all of the participants.
- **Therapeutic meal or liquid supplement** a special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the participant by a dietician (e.g., diabetic diet, renal diet, pureed diet, tube feeding).
- **Nutrition Education** The provision of information to participants to promote nutritional well-being.
- Nutrition Counseling Provision of individualized advice and guidance to individuals, who are at nutritional risk, because of their health or nutritional history, dietary intake, medication(s) use or chronic illness, about options and methods for improving their nutritional status, and performed by a health professional in accordance with state law and policy.
- Nutrition Consultation Provision of information relating to nutrition by a licensed dietician or other qualified person. Services are to be provided to area agencies on aging or nutrition providers.

Participant Eligibility

Services are provided to persons 60 years of age and older and are targeted to older individuals with greatest economic and social need, with particular attention to low-income minority older individuals and older individuals residing in rural areas.

If the nutrition service provided is a home delivered meal, the older individual must be homebound and have impairment(s) in their ability to perform activities of daily living.

In accordance with the OAA, a disabled individual residing with an eligible older individual may accompany the older individual to a congregate meal site and receive a congregate meal. A disabled individual residing in a housing facility occupied primarily with older individuals at which congregate nutrition services are provided may also receive a congregate meal.

Provider Base

Area Agency on Aging Subcontractors and Vendors

Services Availability

Statewide. However, as service priorities and available resources vary across the state, individuals should contact their local AAA for information regarding services in their area.

Contact for Policy Information

Area Agencies on Aging Department of Aging and Disability Services Mail Code W-352 701 West 51st Street Austin, TX 78751 Phone Number (512) 438-4893 Fax Number (512) 438-4374

Contact for Subcontracting/ Vendor Information

Subcontracts and vendor agreements are established and managed by AAAs. Interested parties should contact their local AAA for request for proposal/open enrollment information. To find the proper Area Agency of Aging, access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

How to Apply for Services

Contact your AAA locally, or by dialing 1-800-252-9240 to be automatically connected to the AAA in your area.

Mental Retardation Authorities General Revenue Service

Service Description

Community MHMR Centers are designated as local Mental Retardation Authorities (MRAs). The MRA serves as the point of entry for publicly funded mental retardation programs whether publicly or privately operated. In addition, MRAs provide or contract to provide an array of services for persons in the mental retardation priority population with general revenue funds.

Funding Sources

State of Texas' general revenue account

Covered Services

Services include:

- Eligibility determination
- Service coordination
- Community support
- Employment assistance
- Supported Employment
- Nursing
- Behavioral support
- Specialized therapies
- Vocational training
- Day habilitation

Consumer Eligibility

Consumers must be:

- Persons assessed through MRA and considered eligible for programs through DADS; and
- Part of DADS mental retardation priority population, which consists of individuals who meet one or more of the following descriptions:
 - Persons with mental retardation, as defined by Texas Health and Safety Code Section 591.003;
 - Persons with pervasive developmental disorders, as defined in the current edition of the Diagnostic and Statistical Manual, including autism;
 - Persons with related conditions who are eligible for services in Medicaid programs operated by DADS, including the ICF/MR and waiver programs;

- Nursing facility residents who are eligible for specialized services for mental retardation or a related condition pursuant to Section 1919(e)(7) of the Social Security Act; or
- Children who are eligible for services from the Early Childhood Intervention Interagency Council.

Provider Base

MRA providers and MRA contracted providers

Services Availability

Statewide availability

Contact for Provider or Policy Information

Mental Retardation Authorities Department of Aging and Disability Services Mail Code W-579 P.O. Box 149030 Austin, TX 78714-9030 Phone Number: 512-438-4886 Fax Number: 512-438-4415

Mental Retardation Community Services (General Revenue)

Eligibility Determination: An assessment or endorsement conducted in accordance with Texas Health and Safety Code, 593.005 and 25 TAC Chapter 415, Subchapter D to determine if an individual has mental retardation or is a member of the DADS mental retardation priority population.

Service Coordination: Assistance in accessing medical, social, educational and other appropriate service and supports that will help an individual achieve a quality of life and community participation acceptable to the individual. Services are described in a Plan of Services and Supports that is based on a person-directed process. Service coordination includes reviewing, revising, implementing and monitoring the written plan of services and supports. Service Coordination also assists with linkage and assistance to secure services for crisis management and provision.

Community Support: Provides services and supports through individualized activities consistent with the participant's person directed plan, in a participant's home and at locations such as libraries, stores or other community locations. Provides habilitation or support activities that provide, foster improvement of, or facilitate an individual's ability to perform functional living skills and other activities of daily living.

Employment Assistance: The participant is supported in locating paid employment in the community by assisting the participant to identify his or her employment preferences, his or her job skills, his or her requirements for work setting and work conditions, and prospective employers offering employment compatible with the participant's identified preferences, skills and requirements.

Supported Employment: Employment in an integrated setting with on-going individualized support services consistent with achieving outcomes identified in the participant's person directed plan. Includes individualized services and supports including supervision and training essential to sustain paid work by a participant.

Day Habilitation: Assistance with acquiring, retaining, or improving self help, socialization, adaptive skills necessary to live successfully in the community and participate in home and community life. It includes individualized activities consistent with achieving the outcomes identified in the participant's person-directed plan and activities designed to reinforce therapeutic outcomes. Normally furnished in a group setting other than the individual's residence for up to 6 hours a day, five days per week on a regularly scheduled basis. Includes personal assistance for participants who cannot manage their personal care needs during the day habilitation activity, assistance with medications and the performance of tasks delegated by a RN in accordance with state law.

Vocational Training: Day training services and consistent with achieving the outcomes identified in the participant's person-directed plan provided to an individual in an industrial enclave, a work crew, a sheltered workshop, or an affirmative industry to enable the individual to obtain employment.

<u>Nursing</u>: Includes treatment and monitoring of health care procedures prescribed by physician/medical practitioner and/or required by standards of professional practice or state law to be performed by licensed nursing personnel.

Behavioral Support: Provides specialized interventions that assist a participant to increase adaptive behaviors to replace or modify maladaptive behavior that prevent or interfere with the participant's inclusion in home and family life or community life. This service includes assessment and analysis of assessment findings so that an appropriate behavior support plan may be designed; development of an individualized behavior support plan consistent with the outcomes identified in the participant's person directed plan; training of and consultation with family members or other support providers and as appropriate, with the participant; monitoring and evaluation of the success of the behavioral support plan and modification of the behavior support plan.

Specialized Therapies: Provides assessment and treatment by licensed or certified professionals including social work, occupational therapists, physical therapists, speech, and language pathologists, audiologists, and dieticians and included training and behavioral health services other than those described on Attachment VI A. Services-Adult Mental Health. The service includes consultation with an individual's family members or other support providers.

Home and Community Based Services (HCS)

Service Description

The HCS Program provides individualized services and supports to individuals with diagnoses of mental retardation or a related condition who live in their family home, their own homes, or other community settings such as small group homes where no more than four persons live.

Funding Sources

Title XIX Medicaid 1915(c) Home and Community-Based Services Waiver and State Funds

Covered Services

Services include:

- Case management
- Adaptive aids
- Minor home modifications
- Counseling and therapies (includes audiology, speech/language pathology, occupational therapy, physical therapy, dietary services, social work and behavioral support)
- Dental treatment
- Nursing
- Residential assistance
 - Supported home living
 - Foster/companion care
 - o Supervised living
 - o Residential support
- Respite
- Day habilitation
- Supported employment

Consumer Eligibility

- Age: No limit
- **Income and Resources:** An applicant is financially eligible if he or she:
 - o is eligible for supplemental security income (SSI);
 - o is eligible for Medical Assistance Only (MAO) protected status; or
 - meets the income and resource requirements for Medicaid benefits in an ICF/MR. (\$2,022/month with resources of \$2,000 for an individual. Spousal impoverishment provisions apply.);
 - is a disabled child who would be eligible for Medicaid if institutionalized and if parental income is not deemed to the child;
 - is under 20 years of age, financially the responsibility of TDFPS in whole or in part and is being cared for in a foster home or group home licensed or certified and supervised by TDFPS in which a foster parent is the primary caregiver residing in the home; or
 - is a member of a family who receives full Medicaid benefits as a result of qualifying for Temporary Aid to Needy Families.

Additional Criteria

Individuals must also:

- qualify for an ICF/MR Level of Care (LOC) I;
- have a determination of mental retardation made in accordance with state law or have been diagnosed by a physician as having a related condition;
- have an Individual Plan of Care for waiver services which does not exceed the annual cost limit for services;
- have made a choice of the HCS Program over the ICF/MR Program; and
- not be enrolled in another 1915(c) waiver program.

Provider Base

Community MHMR Centers and private providers

Service Availability

Statewide

Contact for Provider Policy and Consumer Eligibility

Community Services – Policy Development & Support Department of Aging and Disability Services P. O. Box 149030 Mail Code W-521 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Local Contact

To seek enrollment, contact the local Mental Retardation Authority regarding consumer referrals and interest list registration. To find the proper mental retardation authority access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Texas Home Living Program (TxHmL)

Service Description

The TxHmL Program provides selected essential services and supports to people with mental retardation or a related condition who live in their family homes or their own homes.

Funding Sources

Title XIX Medicaid 1915(c) Home and Community-Based Services Waiver and State Funds

Covered Services

The cost of covered services may not exceed \$13,000 per year. Services include:

- Adaptive aids
- Minor home modifications
- Specialized therapies (includes audiology, speech/language pathology, occupational therapy, physical therapy, and dietary services)
- Behavioral support
- Dental treatment
- Nursing
- Community Support
- Respite
- Day habilitation
- Employment assistance
- Supported employment

Consumer Eligibility

- Age: No limit
- Income and Resources: The applicant must be Medicaid eligible prior to enrollment in the program. An applicant is financially eligible if he or she is:
 - eligible for supplemental security income (SSI);
 - eligible for Medical Assistance Only (MAO) protected status;
 - under 20 years of age, financially the responsibility of TDFPS in whole or in part and is being cared for in a foster home or group home licensed or certified and supervised by TDFPS in which a foster parent is the primary caregiver residing in the home;
 - o currently receiving Medicaid for Youth Transitioning Out of Foster Care; or
 - a member of a family that receives full Medicaid benefits as a result of qualifying for Temporary Aid to Needy Families.

Additional Criteria

In addition, applicants must:

- qualify for an ICF/MR Level of Care I;
- have a determination of mental retardation made in accordance with state law or have been diagnosed by a physician as having a related condition;
- have an Individual Plan of Care for waiver services which does not exceed the annual cost for services;
- not be assigned a Pervasive Plus level of need (LON 9);
- live in his or her own or family home;
- have made a choice of the TxHmL Program over the ICF/MR Program; and
- not be enrolled in another 1915(c) waiver program.

Provider Base

Community MHMR Centers and private providers

Service Availability

Statewide

Contact for Provider Policy Information

Community Services - Policy Development and Support Department of Aging and Disability Services Mail Code W-521 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3190 Fax Number 512-438-5133

Local Contact

To seek enrollment, contact the local Mental Retardation Authority regarding consumer referrals and interest list registration. To find the proper mental retardation authority, access the following website:

http://www.dads.state.tx.us/services/contact.cfm

Intermediate Care Facilities for Persons with Mental Retardation or Related Conditions (ICF/MR/RC Program)

Service Description

The Intermediate Care Facility for Persons with Mental Retardation or a Related Condition (ICF/MR/RC) Program provides residential and habilitation services to people with mental retardation and/or a related condition.

Funding Sources

Title XIX Medicaid and State Funds

Covered Services

Services include:

- Residential Services
- Habilitation services
- Medical services
- Skills training
- Adjunctive Therapy services

Consumer Eligibility

A person must:

- meet income and resource limit requirements of SSI or the Medical Assistance Only (MAO) program;
- have determination through Social Security Administration that a disability exists;
- have a Determination of Mental Retardation (DMR) or documentation from a physician of a related condition;
- meet the criteria for a LOC I or LOC VIII; and
- be in need of and able to benefit from the active treatment provided in the 24 hour supervised residential setting of an ICF/MR.

Provider Base

Private providers, Community MHMR Center providers (State Mental Retardation Facilities are ICF/MR providers and are described on a separate profile).

Service Availability

Statewide

<u>Monitoring</u>

The ICF/MR/RC program requires at least an annual health and Life Safety Code re-certification survey and licensure inspection conducted by the Department of Aging and Disability Services, Regulatory Services Division.

Contact

Provider Services- Institutional Services Department of Aging and Disability Services P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3543 Fax Number 512-438-3555

Local Contact

To seek enrollment, contact the local Mental Retardation Authority regarding consumer referrals. To find the proper mental retardation authority, access the following website: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

In-Home and Family Support Mental Retardation Authorities

Service Description

Direct grant benefits to individuals with mental retardation and/or his family to purchase services that directly support the person to live in his or her natural home; integrate the person into the community; or promote the person s selfsufficiency.

Funding Source

State Funds

Covered Services

Services include:

- Special Equipment as follows: therapy equipment, motorized or hand powered lift; mobility equipment; medical equipment; and assistive technology.
- Architectural modifications to the persons natural home as specified in TAC, Ch. 411, Subchapter I.
- Health Services such as therapy; diagnostic service; medication; surgery; laboratory service; dental; non-durable or disposable supply; adaptive aids; and specialized nutritional products.
- Counseling and training services such as counseling, behavior therapy, independent or daily living training; family or caregiver training; job coach services; and remedial education for an adult.
- Home Care services as specified in the TAC, Ch. 411, Subchapter I;
- Transportation services as specified in the TAC, Ch 411, Subchapter I;
- Respite Care: both in home and out of home.
- Other items as agreed upon by the person or family and the administering agency that meet the criteria of the In Home Family Support Program-Criteria, Purpose and limitations.

Consumer Eligibility

- Diagnosis: A diagnosis of mental retardation or pervasive developmental disorder; or be younger than 4 years of age and have a developmental delay diagnosed within the previous 12 months; or determined to be eligible for early childhood intervention.
- **Residency:** Currently living in his natural home or be leaving an institution and moving into a home in the community.

- **Financial:** Person age 18 or older, or parents of a child under age 18 with net earnings less than 150% of Texan current median income level. Co-payment is determined based on schedule in rule.
- **Need:** The person may not be receiving services from another In Home and Family Support program or any comprehensive support program. The person must have a need than can be met by the program.

Reimbursement

Following development and approval of a written plan, the administering agency will disburse assistance in accordance with the plan. Assistance up to \$2,500 per fiscal year will be disbursed to the person, family or provider performing work on behalf of the person or family and disbursed in a lump sum or on a periodic basis.

Methodology Unit of Service

Varied

Service Availability

Statewide in every county. Program has an interest list in all areas.

Contact for State Office

Mental Retardation Authorities Department of Aging and Disability Services Mail Code W-350 P. O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-4886 Fax Number 512-438-4374

How To Apply for Services

Contact your local Mental Retardation Authority office. The web site to locate the MRA for a community is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

State Mental Retardation Facilities

Service Description

State Mental Retardation Facilities is comprised of thirteen facilities that provide 24-hour/day residential, treatment and training services for persons with mental retardation. Each facility is certified as an Intermediate Care Facility for Persons with Mental Retardation (ICF-MR), a Medicaid-funded federal/state service program.

Funding Source

Federal and State Funds

<u>Services</u>

Services include:

- 24-hour Residential Care and Support
- Comprehensive Behavioral Treatment Services
- Comprehensive Health Care Services
 - o Physician Services
 - Nursing Services
 - Dental Services
- Occupational, Physical, Speech Therapies
- Skills Training
- Vocational Programs
 - Campus-based and Community-based Sheltered Workshops
 - o Community-based Supported Employment
 - Independent Employment Services
- Services to maintain connections between residents and families/natural support systems

Individuals Served

Residential services in a state mental retardation facility are intended to serve individuals with severe or profound mental retardation and those individuals with mental retardation who are medically fragile or have behavioral problems.

How to Apply for Services

Contact your local DADS Mental Retardation Authority. The web site to locate t he MRA for a community is: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

Guardianship

Service Description

Guardianship is a legal method to protect individuals' well being when they cannot protect themselves. A guardian is a court-appointed person or entity that makes decisions on behalf of an incapacitated person. Chapter 13 of the Probate Code defines the purpose, laws and responsibilities of a Guardian. Depending upon the powers granted by the court, guardianship responsibilities include but are not limited to:

- managing estates;
- making medical decisions; and
- arranging for placement.

The purpose of the program is to provide guardianship services to individuals who have been found by a court to be incapacitated. In order for DADS to provide guardianship services, least restrictive alternatives must not be available, an appropriate and qualified alternate guardian must not be available and willing to serve, a ward must have resources available to fund services, including longterm care (Human Resources Code, Chapter 48.209 (d), and it must be expected that guardianship will meet their needs.

The agency may seek guardianship of:

- Incapacitated children reaching adulthood in Child Protective Services CPS conservatorship as defined in the Human Resource Code Chapter 48.209(a); or
- Incapacitated adults in Adult Protective Services APS investigations in which abuse, neglect, or exploitation has been confirmed and there are no other means of protecting the person as defined in the Human Resource Code Chapter 48.209(b); or
- Incapacitated individuals referred to DADS by a court of law and for whom DADS agrees to provide guardianship under the provision of "otherwise agree" and who meet criteria as defined in the guardianship standards.

Funding Sources

General Revenue and Title XX Block Grant

Covered Services

Guardianship services include managing the ward's:

- Living arrangements;
- Citizenship issues;
- Estates;
- Medical treatment, including extraordinary medical procedures; and
- Funeral arrangements and disposal of property.

Consumer Eligibility

Aging out Children:

Human Resources Code Chapter 48.209(a) allows the application for guardianship of the person and/or estate of a child aging out of Child Protective Services (CPS) conservatorship:

- who meets the definition of incapacity in Probate Code Chapter 601, unless a less restrictive alternative is available, and
- for whom no guardian can be found.

Elderly Persons and Adults with Disabilities:

Human Resources Code Chapter 48.209(b) allows the agency to apply for guardianship of an elderly person or an adult with a disability who:

- is found by the department to be in a state of abuse, neglect, or exploitation,
- meets the definition of incapacity in Probate Code Chapter 601, and
- for whom no guardian can be found.

Wards must have resources to fund services, including long-term care. Human Resource Code Chapter 48.209(d).

Services Availability

Statewide

Contact for Policy Information

Guardianship Department of Aging and Disability Services Mail Code W-353 P.O. Box 149030 Austin, TX 78714-9030 Phone Number 512-438-3739 Fax Number 512-438-3835

Promoting Independence

In January 2000, Texas embarked on a Promoting Independence Initiative in response to the U.S. Supreme Court ruling in Olmstead v. Zimring. The Court ruled in June 1999 that states must provide community-based services for persons with disabilities who would otherwise be entitled to institutional services, when:

- the state's treatment professionals determine that such placement is appropriate;
- the affected persons do not oppose such treatment; and
- the placement can be reasonably accommodated, taking into account the resources available to the state and the needs of others who are receiving state supported disability services.

Texas' Promoting Independence initiative supports allowing an individual with a disability to live in the most appropriate care setting available. The statewide initiative began in 1999 when then Gov. George W. Bush affirmed the value of community-based alternatives for persons with disabilities in an Executive Order.

More recently, Gov. Rick Perry signed Executive Order RP 13 on April 18, 2002, also relating to community-based alternatives for people with disabilities. In response to Governor Bush's Order and the Supreme Court's decision in Olmstead v. Zimring, the Texas Health and Human Services Commission developed the Texas Promoting Independence Plan.

Individuals Residing in Nursing Facilities

If an individual is a Medicaid consumer in a Texas nursing facility, he or she can request services in his or her own community under HB 1867 (79th Legislative Session). This is the same as DADS Rider 37, 77th Legislative Session and Rider 28, 78th Session, known as "Money Follows the Person."

To take advantage of Money Follows the Person, the individual must reside in a nursing facility until a written eligibility determination by a community care case manager indicates the individual is approved for specific community care services and when those services will begin. These procedures must be followed in order for an individual to qualify for services under Money Follows the Person provisions. If not, the name of an individual can be placed on an interest list to receive community services.

Starting in November 2004, DADS began publishing a report each month that shows the number of persons in Texas nursing facilities who have expressed an interest in returning to their communities. Statewide Relocation Assistance is available to nursing facility residents from the Independent Living Centers (ILCs). DADS contracted with four ILCs to assist in the transition of individuals from facilities to the community. The contracts have been renewed and extended beginning in July 2004. The four Relocation Services contractors are:

- Austin Resource Center for Independent Living (ARCIL) (Regions 3 and 7)
- Crockett Resource Center (Regions 4 and 5)
- Accessible Communities Inc./Coastal Bend Center (Regions 6, 8, and 11)
- LIFERUN (Regions 1, 2, 9, and 10)

Assistance is available to nursing facility residents from the local Area Agencies on Aging (AAAs). AAAs provide information about community options such as housing, health care, transportation, daily living and social activities that can help individuals and their families make decisions from the planning phase to actual relocation in the community.

Money Follows the Person Grant

In September 2003, the federal Centers for Medicare and Medicaid Services awarded a grant of more than \$730,000 to support individuals who want to leave a nursing facility and receive care in their community. The grant is designed to:

- educate employees, advocates, and other stakeholders involved in the transition process about community care options to ensure that all programs are considered when an individual decides to return to the community; and
- establish local community care coordination workgroups across the state to enable individuals to transition from the nursing facility into a community setting appropriate to their needs and choice.

Individuals Residing in ICF/MR Facilities

In 2000, the Community Living Options process was implemented for individuals who reside in intermediate care facilities for persons with mental retardation (ICFs/MR). The Living Options process was designed to identify an individual who indicates a preference for an alternative living arrangement to the institutional setting. An individual who indicates a desire for alternative services is referred to the local Mental Retardation Authority (MRA).

As resources allow, Medicaid home and community-based waiver program services (HCS) are offered to individuals identified for an alternative living arrangement and:

- who reside in a state mental retardation facility or in a large (14 beds or more) community ICF/MR; and
- whose names are on the state's HCS interest list.

The state's goals in response to the Texas Promoting Independence Plan include:

- providing opportunities for individuals residing in state mental retardation facilities to move to a community alternative within 180 days of any individual's request and recommendation for movement to an alternative living arrangement; and
- providing opportunities for persons living in community ICFs/MR that serve 14 or more individuals to move to a community alternative within 12 months of the date they are determined to be ready for an alternative living arrangement.

Transition to Life in the Community (TLC) Grants

Transition to Life in the Community grants provide a one-time assistance of up to \$2,500 to help nursing facility residents move to community settings. These funds can be used for moving expenses, to purchase needed household items and to cover other expenses related to re-establishing a home in the community. These grants are available for any Medicaid eligible nursing facility resident who wishes to move to the community.

Housing Voucher Program

The Housing Voucher Program (HVP) provides housing opportunities to nursing facility residents interested in Section 8 housing. The Health and Human Services Commission, Texas Department of Housing and Community Affairs (TDHCA), and the Department of Aging and Disability Services are working in partnership to distribute 35 housing vouchers awarded to TDHCA.

DADS identifies nursing facility residents interested in Section 8 housing and forwards the referral to TDHCA. The eligibility determination is processed by TDHCA. Some local housing authorities are assuming the cost under their program and returning the voucher making it possible for TDHCA to reissue the same voucher to more than one individual.

Nursing facility residents interested in Section 8 housing are eligible for referral to TDHCA. TDHCA determines eligibility for the housing voucher based on income and resources. The individual does not have to receive community care services to participate in the program.

Community Transition Teams

The Money Follows the Person Grant allows DADS to contract with a service provider to work with state office and regional staff in establishing Community Transition Teams in every region.

These teams assist with the coordination of needed services and support for individuals needing assistance with their transition, and they identify and address transition barriers.

Community Services Interest List Unit Numbers for Community Programs

Interest lists for community-based programs are managed either locally or statewide, depending on the program. The programs and their contact numbers are:

Programs	Contact Numbers
Community Based Alternatives (CBA)	Call your local DADS Office
Community Living Assistance and Support Services (CLASS)	1-877-438-5658
Deaf/Blind with Multiple Disabilities (DBMD)	1-877-438-5658
Home and Community Services (HCS)	1-877-438-5658
Medically Dependent Children's Program (MDCP)	1-877-438-5658

Allocations are based on available funding. Consumers who have been on the interest lists the longest are enrolled first. Enrollment is done by the following:

- DADS regional staff
- Mental Retardation Authorities
- CLASS providers
- DBMD providers

How to Contact a Local DADS Office

• Use this link on the web to find contact information for local DADS offices:

http://www.dads.state.tx.us/services/contact.cfm

- Enter the **City, County** or **ZIP code** of the person interested in services and click **SEARCH.**
- Choose the appropriate DADS local intake office.
- Call the number listed. Tell the person who answers that you wish to speak to someone to do an intake for CCAD Services.

DADS Helpful Numbers

Helpful numbers can be located on the DADS web site at: <u>http://www.dads.state.tx.us/services/contact.cfm</u>

The following abbreviations are used in the "List of All DADS Services" link noted on the left column.

Abbreviations	
AAA	Area Agencies on Aging
APS	Adult Protective Services
CAS	Community Attendant Services
CBA	Community Based Alternatives
CLASS	Community Living Assistance and Support Services
CMS	Claims Management System
CWP	Consolidated Waiver Program
CMPAS	Consumer Managed Personal Assistant Services
DADS	Department of Aging and Disability Services
DAHS	Day Activity Health Services
DARS	Department of Assistive and Rehabilitative Services
DB-MD	Deaf-Blind with Multiple Disabilities
DFPS	Department of Families and Protective Services
DSHS	Department of State Health Services
ERS	Emergency Response System
FC	Family Care
HCS	Home and Community Based Services
HCSSA	Home and Community Support Services Agency
HDM	Home Delivered Meals Services
HHSC	Health and Human Services Commission
HICAP	Health Information Counseling and Advocacy Program
ICF/MR	Intermediate Care Facility/Mental Retardation
ICM	Integrated Care Management
IHFSP	In-Home and Family Support Program
LTC	Long Term Care
LTSS	Long Term Support Services
LTC-R	Long Term Care Regulatory
MDCP	Medically Dependent Children Program
PACE	Program of All-Inclusive Care for the Elderly
PASSARR	Pre-Admission Screening and Resident Review
PCS	Provider Claims Services
PHC	Primary Home Care
TDI	Texas Department of Insurance
RC	Residential Care
RUG	Resource Utilization Group
SSPD	Special Services to Persons with Disabilities
SSPD-SAC	Special Services to Persons with Disabilities
TxHmL	Texas Home Living Waiver Program