



Virginia Department of  
Behavioral Health &  
Developmental Services

# Informational Session and What to Expect After Receiving A DD Waiver

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Presented by:  
The Division of Developmental Services  
Office of Provider Network Supports

July  
2023

# Overview

## What we will talk about:

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- **Key agencies and key roles**
- **HCBS Settings Regulations**
- **Types of waivers and waiver services**
- **Person Centered Practices and the (ISP)**
- **Assessments**
- **What else you need to know**
- **Support with decision making**

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# Key Agencies

# Key Agencies

## Department of Medical Assistance Services (DMAS)

- Single state agency for Medicaid
- Payment to providers
- Appeals

For more information about appeals

<https://www.dmas.virginia.gov/appeals/>

# Key Agencies

## Department of Social Services

VDSS is one of the largest Commonwealth agencies, partnering with 120 local departments of social services, along with faith-based and non-profit organizations, to promote the well-being of children and families statewide. They ensure that thousands of Virginia's most vulnerable citizens have access to the best services and benefits available to them. This is also where you would go to **apply for Medicaid**.

<https://www.dss.virginia.gov/>

# Key Agencies

## Department of Behavioral Health & Developmental Services (DBHDS)

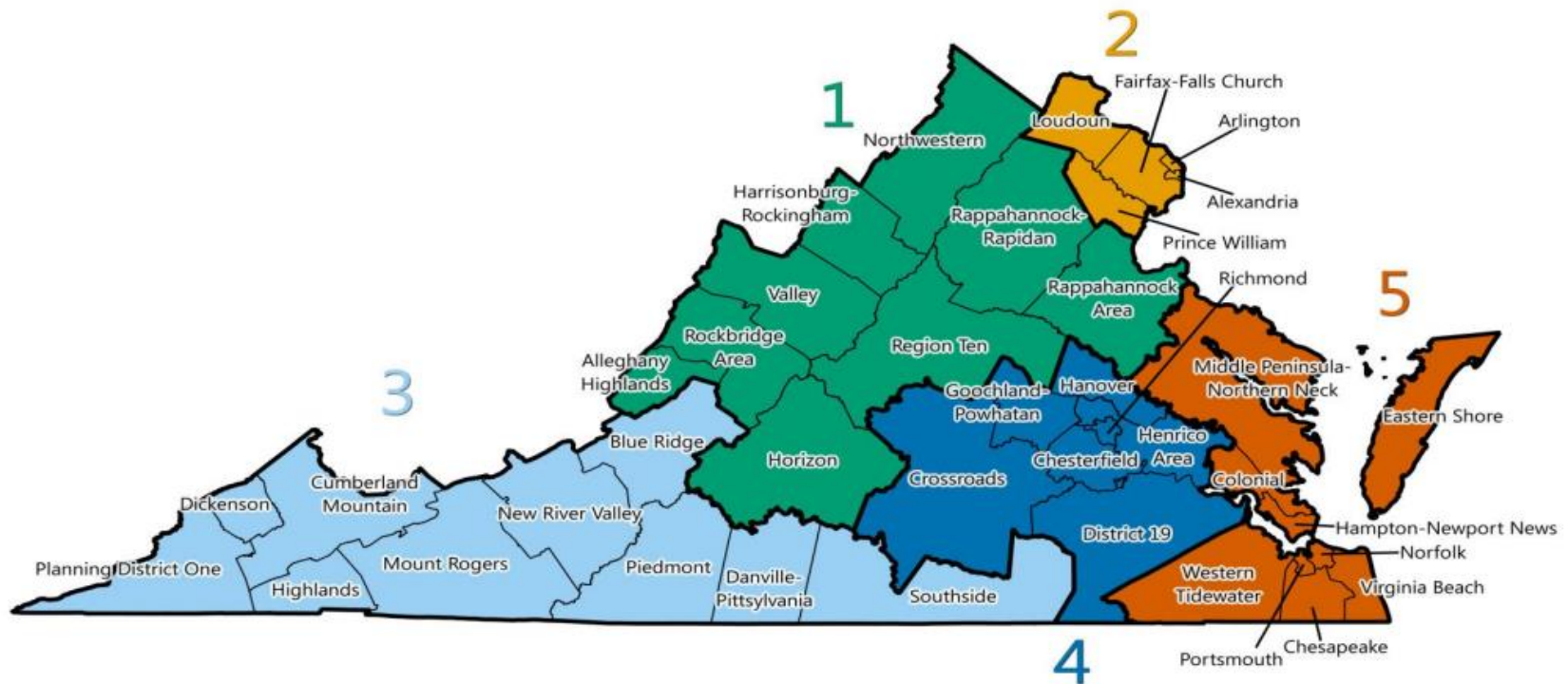
- Service Authorization
- Technical Assistance
- Training
- Daily Operations
- Licensing
- Human Rights

# Another Key Agency

## Community Services Boards (CSBs) **or** Behavioral Health Authority (BHAs)

- Single point of entry
- Support Coordination
- Service Providers

# Virginia's Community Services Boards



Primary DBHDS Regions for Community Services Boards



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# Support Coordination

# Expectations of Support Coordinators

**DD Support Coordinators who may also be referred to as Case Managers are a critical part of the system of services and supports for people with DD in Virginia!**



# Support Coordinator Role

- **Advocating** for individuals in response to their changing needs;
- **Planning** for transitions in the individual's life;
- **Knowing and monitoring** the individual's health status, any medical conditions, and his medications and potential side effects, and assisting the individual in accessing primary care and other medical services, as needed; and



# Support Coordinator Role

- **Communicating with providers** to share vital information
- **Communicating with Care Coordinators** of the Managed Care Organizations (MCOs) to update them on an individual's needs and services and obtain results of their HRAs
- **Collaborating** with care coordinators regarding medically related issues to develop coordinated plans to mitigate risks and risks of harm
- **Reporting** alleged abuse, neglect or exploitation to Adult Protective Services (APS) and Child Protective Services

# Support Coordination Role

- SCs are the **eyes and ears** of the service system
- They have the ability to **observe and appropriately respond** to situations and are essential to ensuring that the service system is accountable for assuring a person's safety and that needs are being met
- They serve as a **front-line defense** against violations of human rights, risks to health & safety, abuse, neglect, and exploitation
- The Support Coordinator is required to have a face-to-face visit with all those under Targeted Case Management services not less than every 90 days. If the individual meets the criteria for Enhanced Case Management, the SC is required to see that individual every 30 days.

# Are SC's Assigned or Selected?

Support Coordinators are assigned by the CSB. The CSB tries to make the best match with the individual. However, there may be instances when you are dissatisfied with your assigned SC and need to request another SC. At that point, reach out to the SC Supervisor to discuss the issues and request a change.

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# HCBS

# CMS HCBS Settings Regulations

The Home and Community-Based Services (HCBS) settings regulations (previously known as the “Final Rule”) were published in the Federal Register on January 16, 2014; they became effective March 17, 2014.

- Designed to enhance the quality of HCBS, provide additional protections, and ensure full access to the benefits of community living.



# CMS HCBS Settings Regulations

Any residential or non-residential setting where individuals live and/or receive HCBS must have the following five qualities:

1. Integrated in and support full access of individuals to the greater community
  - Provide opportunities to seek employment, work in competitive integrated settings, engage in community life, control personal resources, and
  - Ensure that individuals receive services in the community, to the same degree of access as individuals not receiving HCBS.

# CMS HCBS Settings Regulations

3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. Optimizes individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.
5. Facilitates individual choice regarding services and supports, and who provides them.

# CMS HCBS Settings Regulations

- Settings include
  - Group homes
  - Sponsored placements
  - Supported living residential
  - Group Day
  - Group Supported Employment

# CMS HCBS Settings Regulations

## **Additional Requirements for Residential Settings:**

- The person has a lease or other legally enforceable agreement providing similar protections as VA's Landlord Tenant Law
- The person has privacy in their unit including lockable doors, choice of roommates and freedom to furnish or decorate the unit
- The person controls his/her own schedule including access to food at any time
- The person can have visitors at any time
- The setting is physically accessible



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# What is a Waiver

# Medicaid Wavier

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Medicaid Waivers, began in 1981 as a means to correct the “institutional bias” of Medicaid funding.

Medicaid HCBS waivers provide opportunities for people eligible for an institutional level of care to receive services in their own home or community rather than an institutional setting.

Under a Medicaid waiver, a state can waive certain Medicaid program requirements, allowing the state to provide services and supports in the community versus an institutional setting.

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# Virginia's 3 DD Waivers

# Virginia's DD Waivers

## Building Independence Waiver

**For adults (18+) able to live independently in the community.**

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

## Family & Individual Supports Waiver

**For individuals living with their families, friends, or in their own homes, including supports for those with some medical or behavioral needs. Available to both children and adults.**

## Community Living Waiver

**Includes residential supports and a full array of medical, behavioral, and non-medical supports. Available to adults and children. May include 24/7 supports for individuals with complex medical and/or behavioral support needs through licensed services.**



# Community Living Waiver

Includes residential supports and a full array of medical, behavioral, and non-medical supports. Available to adults and children. May include 24/7 supports for people who choose residential services, including those with complex medical and/or behavioral support needs, through licensed services.



# Covered Services

## Community Living Waiver

- Assistive Technology service
- Benefits planning service
- Center-based crisis support service
- Community-based crisis support service
- Community coaching service
- Community engagement service
- Community Guide service
- Companion service
- Crisis support service
- Electronic home-based support service
- Environmental modifications service
- Group Day service
- Group home residential
- Group and individual supported employment service
- In-home support service
- Independent living support service
- Employment and community transportation service
- Peer mentor supports service
- Personal assistance services
- Personal Emergency Response System service
- Private duty nursing service
- Respite service
- Shared living service
- Services facilitation service
- Shared living service
- Skilled nursing service
- Sponsored residential service
- Supported living residential service
- Therapeutic consultation service
- Transition service
- Workplace assistance service

# Family and Individual Supports Waiver

For people who live with their families, friends, or in their own homes, including supports for those with some medical or behavioral needs. Available to both children and adults.



# Covered Services

## Family and Individual Support Waiver

- Assistive Technology service
- Benefits planning service
- Center-based crisis support service
- Community-based crisis support service
- Community coaching service
- Community engagement service
- Community Guide service
- Companion service
- Crisis support service
- Electronic home-based support service
- Environmental modifications service
- Group Day service
- Group and individual supported employment service
- In-home support service
- Individual and family/caregiver training service
- Employment and community transportation service
- Peer mentor supports service
- Personal assistance services
- Personal Emergency Response System service
- Private duty nursing service
- Respite service
- Services facilitation service
- Shared living service
- Skilled nursing service
- Supported living residential service
- Therapeutic consultation service
- Transition service
- Workplace assistance service

# Building Independence Waiver

For adults (18+) who to live independently in the community with supports. People own, lease, or control their own living arrangements and supports are complemented by non-waiver-funded rent subsidies.



# Covered Services

## Building Independence Waiver

- Assistive Technology service
- Benefits planning service
- Center-based crisis support service
- Community-based crisis support service
- Community coaching service
- Community engagement service
- Community Guide service
- Crisis support service
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- Group and individual supported employment service
- Independent living support service
- Employment and community transportation service
- Peer mentor supports service
- Personal Emergency Response System service
- Shared living service
- Transition service

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# Assessments

# Virginia Individual DD Eligibility Survey (VIDES)

The VIDES is used initially and annually by the SC/CM to confirm functional eligibility for the DD Waivers.

The VIDES:

- \* Must be completed no more than six months prior to waiver enrollment and annually, prior to the ISP meeting, once waiver services have begun.
- \* Must be conducted by a qualified (received training from a supervisor) Support Coordinator **in person (face-to-face) with the individual** and, as applicable, with another person who knows the individual well.
- \* The results of the VIDES must be recorded in the Waiver Management System (WaMS).



# Risk Awareness Tool

## The Risk Awareness Tool

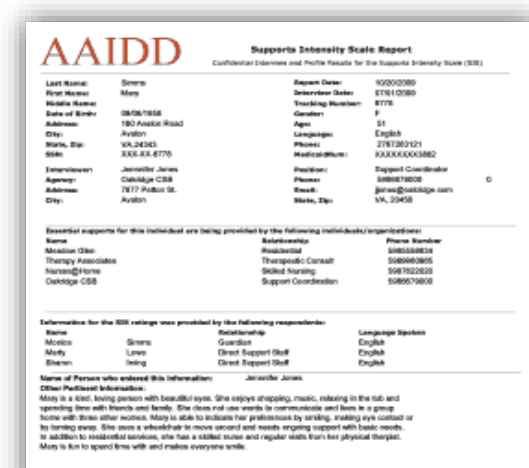
- Is a tool that has been designed to increase awareness of the potential for a harmful event (e.g., bowel obstruction, sepsis, fall with injury, self-harm, elopement, etc.) to occur and to facilitate the process of taking action to reduce and prevent the risk.
- Will be completed by the Support Coordinator/Case Manager at or prior to the initial Waiver meeting and annually thereafter.
- Identified risks must be addressed in the ISP

## Risk Awareness Tool

The SIS<sup>®</sup> is an assessment tool developed by The American Association on Intellectual and Developmental Disabilities (AAIDD).

It measures the person's support needs in personal, work-related, and social activities in order to identify and describe the types and intensity of the supports a person requires.

The SIS<sup>®</sup> reflects a positive way of thinking about an assessment, focusing on the support needs for the person to be successful, not on his or her deficits.



## Supports Intensity Scale (SIS)<sup>®</sup>

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The assessment is completed by the team, including the person, his or her family and significant others, the Support Coordinator, and other providers, at least every three years for adults (or when support needs significantly change).

The SC receives a copy of the SIS<sup>®</sup> report and gives a copy to providers.

The SIS<sup>®</sup> score is a part of determining what support level a person is assigned to, which in turn dictates the reimbursement tier (for some services).

## Supports Intensity Scale (SIS)<sup>®</sup>

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# Forms

# Consent to Exchange Information

The SC is responsible for ensuring there is documentation of Consent to Exchange Information. During the initial assessment, as needed, and annually thereafter, the SC should ensure there are current consent forms for any collateral contacts or organizations to which the SC must communicate and/or release information pertaining to the person who uses SC services.

# Human Rights Notification

During the initial assessment and annually thereafter, the SC must ensure that the person is aware of and has reviewed their human rights as described in the Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, funded, or operated by the Department of Behavioral Health and Developmental Services (Human Rights Regulations).

More information the Human Rights Regulations is located at [https:// dbhds.virginia.gov/quality- management/human-rights](https://dbhds.virginia.gov/quality-management/human-rights)

# Informed Choice

Support Coordinators are required to have signed documentation of informed choice:



- Annually
- At the time of enrollment into one of the DD Waivers
- When there is a request for change in waiver providers
- When new services are requested

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# What do you do when a slot is awarded





# A Waiver slot has been awarded

1. The individual and or guardian will be contacted by their SC to offer the waiver slot. It will be explained which waiver was awarded.
2. The SC will need to ensure eligibility documentation is on file  
→ psychological evaluation/ assessment, Right to Appeal from waiting list, Recipient Choice form, identification documents (photo ID, SSN card, birth certificate)
3. The individual will need to apply for Medicaid (if needed)

# A Waiver slot has been awarded

4. If the Individual/family has not shared a decision a second attempt is made by the SC
5. If the slot is accepted, the SC will enroll the individual into the waiver in WaMS.
6. The SC will coordinate an ISP update meeting and complete all waiver forms → VA Informed Choice, RAT, HCBS Rights...
7. Begin working on exploring desired services and providers

# A Waiver Slot was offered

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If no decision is made:

- DBHDS RSS staff will remove the individual from projected enrollment status, return him to the waiting list, and take steps to assign the slot to the next highest scoring individual from the review pool.

# What To Do: DD Waiver Slot Awarded

If the services are not initiated within 30 calendar days of the Support Coordinator moving the individual to active enrollment status in WaMS or confirmation of Medicaid eligibility, whichever comes first, the SC must notify the local department of social services so that reevaluation of the individual's financial eligibility can be made.

# What To Do: DD Waiver Slot Awarded

The SC must submit a Request to Retain Slot to DBHDS through WaMS pending the initiation of services. A copy of the request must be provided to the individual and the individual's family/caregiver, as appropriate.

DBHDS may approve the slot-retention request in 30-day extensions, up to a maximum of four consecutive extensions, or deny the request to retain the waiver slot for the individual when, at the end of this extension time period, there is no evidence of the individual's efforts to utilize waiver services.

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# Person Centered Practices and the ISP

# Person Centered Practices

In 2009, the principles of Person-centered (PC) Practices became the foundation of Virginia's Individual Support Plan in DD waivers.

Over the years, people have been increasingly supported to make decisions about fundamental aspects of living in ways that matter most to them personally.





# Person Centered Practices

The benefits of person-centered practices are evident, but we must now develop person-centered plans that are specific to each person, retain the basics of accountability, and ultimately lead to meaningful changes in a person's life.



## Person-Centered Planning

# Person Centered Practices

**Person-centered Planning** is a planning process that focuses on the needs and preferences of the person (not the system or service availability) and empowers and supports people in defining the direction for their own lives.

Person-centered planning promotes self-determination, community inclusion and supporting people to have the lives they want.

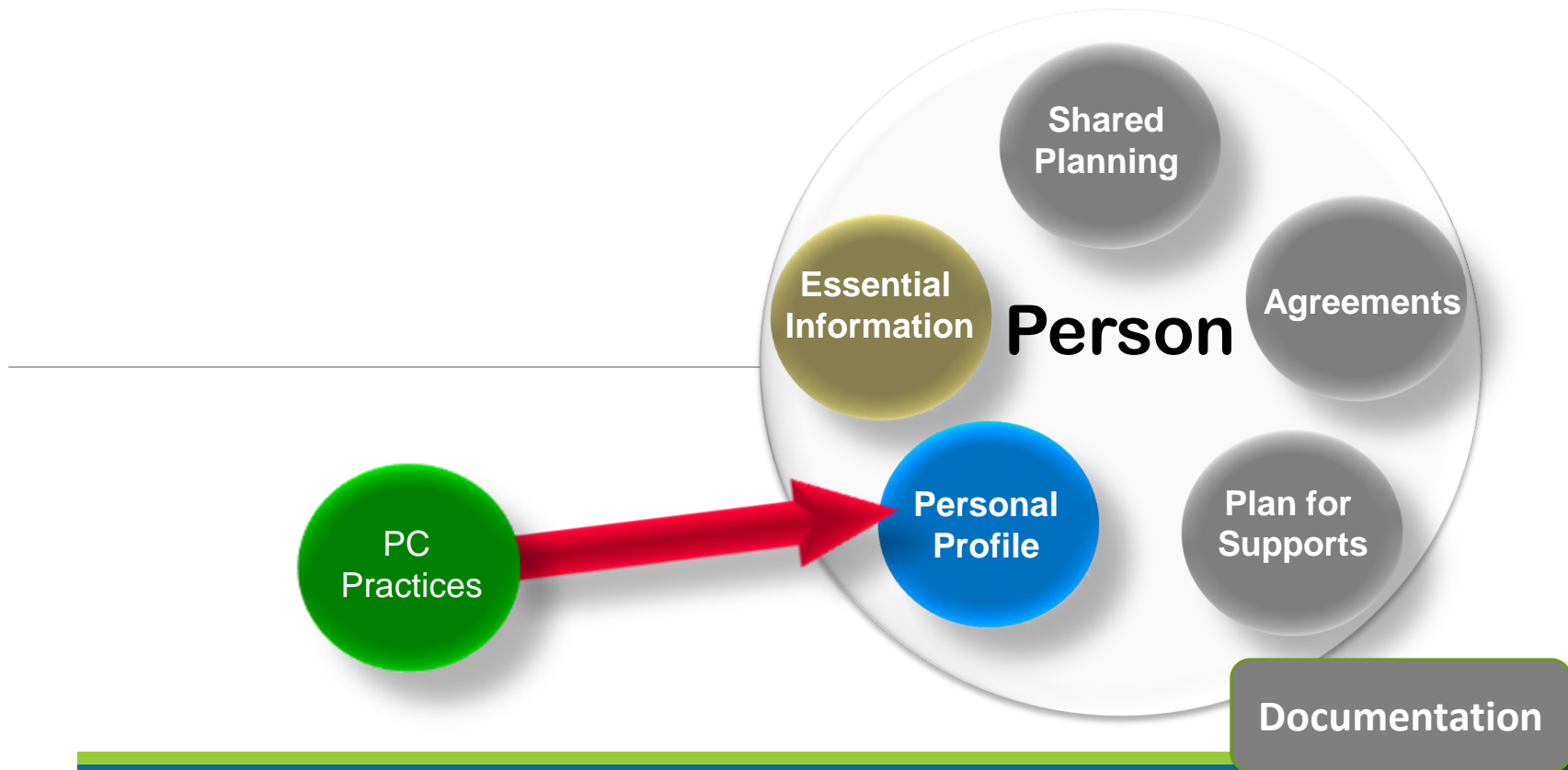


## Person-Centered Planning

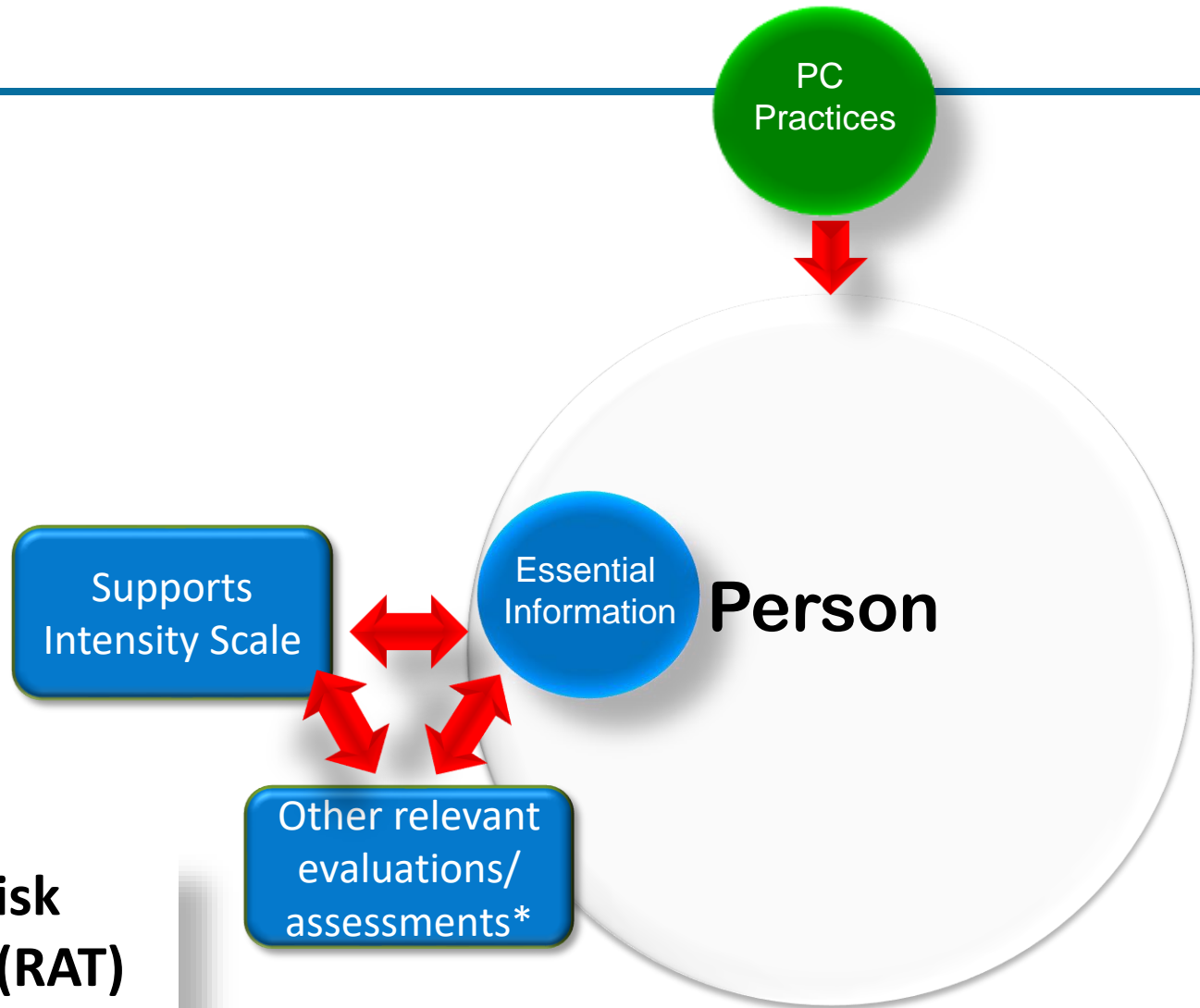
# The Learning Community for Person Centered Practices envisions a world where all people have positive control over the lives, they have chosen for themselves.

- The ISP meeting is a focused time to discuss a person's hopes, dreams and wishes for their lives
- Setting the stage for **meaningful** and **genuine** conversations is the right thing to do as we explore what a person wants for their future



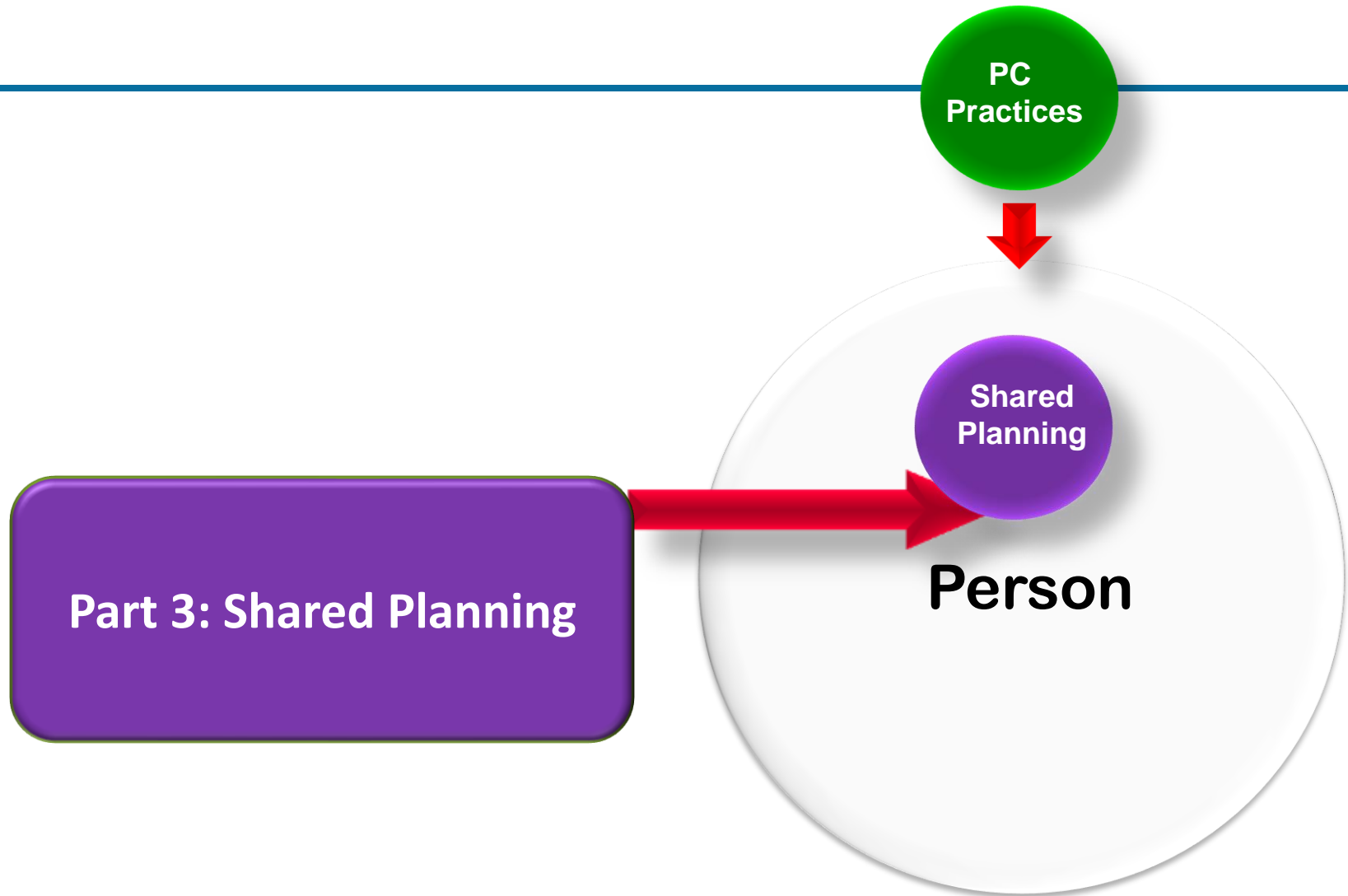


# Part II: The Essential Information

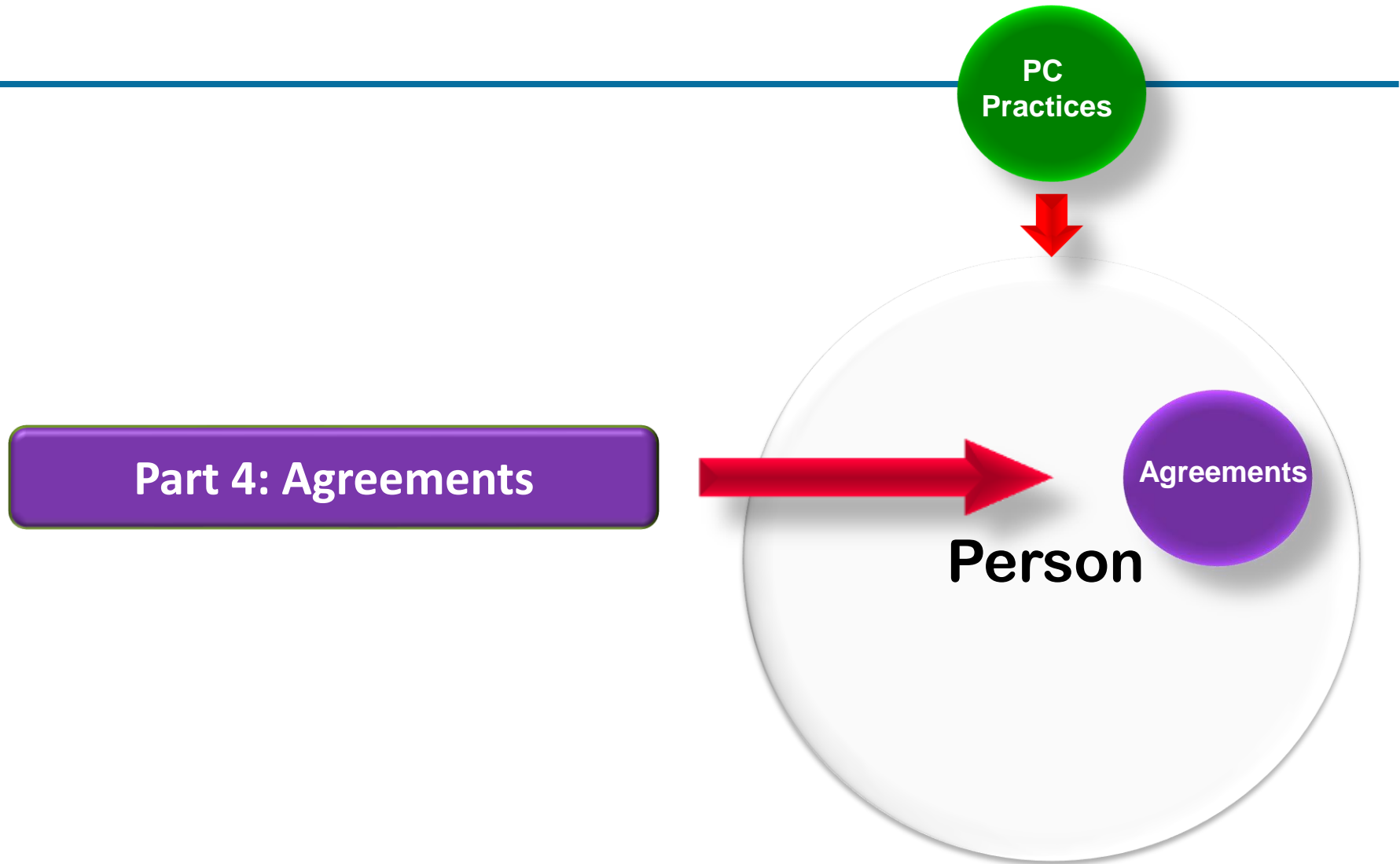


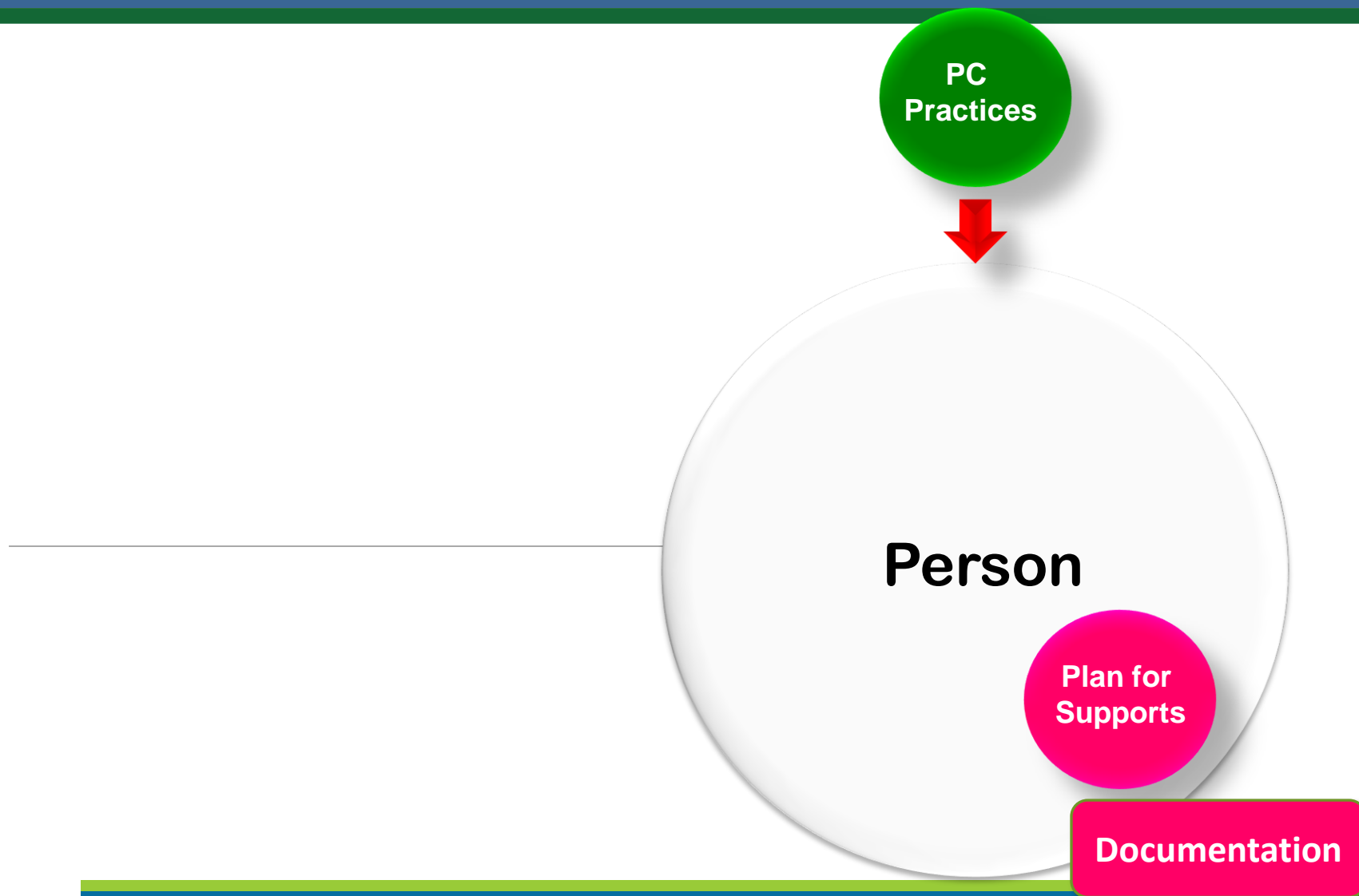
**\*Including the Risk Awareness Tool (RAT)**

# Part III: Shared Planning



# Part IV: Agreements







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# Provider Options

## What to consider

# Provider Search

After the decision has been made about desired services, it is now the time to select a provider. A few things to consider and keep in mind:

- Location
- Knowledge and experience of the provider
- Set up tours and ask any questions you may have. There are several resources when it come to looking for providers. With the biggest one being the SC
- The SC should be working in collaboration with the individual and family to locate a provider of the desired service.



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# Service Authorization

# Service Authorization

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DBHDS is the DMAS designated agency tasked to approve all Service Authorization (SA) requests for the DD Waivers.

Service authorization means the process to approve services for a person who is enrolled in Waiver. Service authorization does not guarantee payment for the service.

# Service Authorization

Support Coordinator:  
Create Service  
Authorization (SA)

Provider: Enter Plan for  
Supports in WaMS; Add  
Service to SA

Support Coordinator:  
Review SA and Plan for  
Supports/ Add Services  
if needed

Provider: Revise Service  
Authorization

DBHDS Staff: Approve,  
Reject, Deny, Pend  
Service Authorization

Medicaid Enterprise  
System (MES): Processes  
Service Authorization

HOW  
TO...

## Service Authorization Process

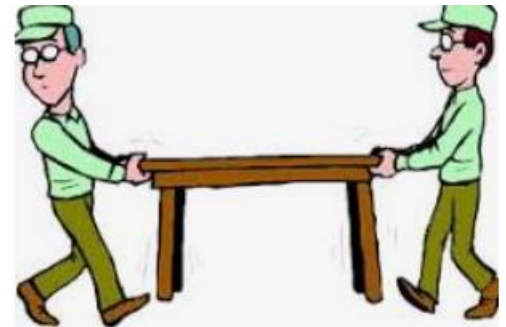
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# Transfers

# Transfers

If an individual receiving waiver services moves or intends to move into a new catchment area, the CSB/BHA of origin must contact the receiving CSB/BHA to inform them.

This initial contact is considered a courtesy and is not considered an official request to transfer. However, this initial communication leads to a smooth transition and is recommended.



# Ending Services



# Ending Services

Support Coordinators should work to resolve concerns and involve their supervisor if needed. If the SC is unable to resolve the concern, a team meeting should be called. The meeting should include the SC, the person and their substitute decision maker, as applicable, relevant providers, and anyone else the person chooses to be at their meeting. Meetings can be in person, but can also be by phone or conference call.

# Ending services

If there is no resolution and ultimately the individual and family want to end services than the provider would end the authorization in WaMS and the individual is free to choose another provider.

If it is the provider that is ending services, they are required to following their agencies policies and procedures.

# Loss of Waiver

# Loss of Waiver

However, there are a few reasons why an individual would lose their waiver.

- The individual's health, safety, welfare and medical needs can no longer be safely met in the community
- The individual no longer meets the functional or financial eligibility
- The individual was eligible for one of the waivers and accepted a waiver slot but did not start services for five months (150 days)
- The individual moves to another state
- The individual declines DD waiver services
- The individual enters an ICF/IID, NF, or rehabilitation hospital

# Supported Decision Making

Everyone has the right to meaningfully participate in decisions regarding all aspects of their life

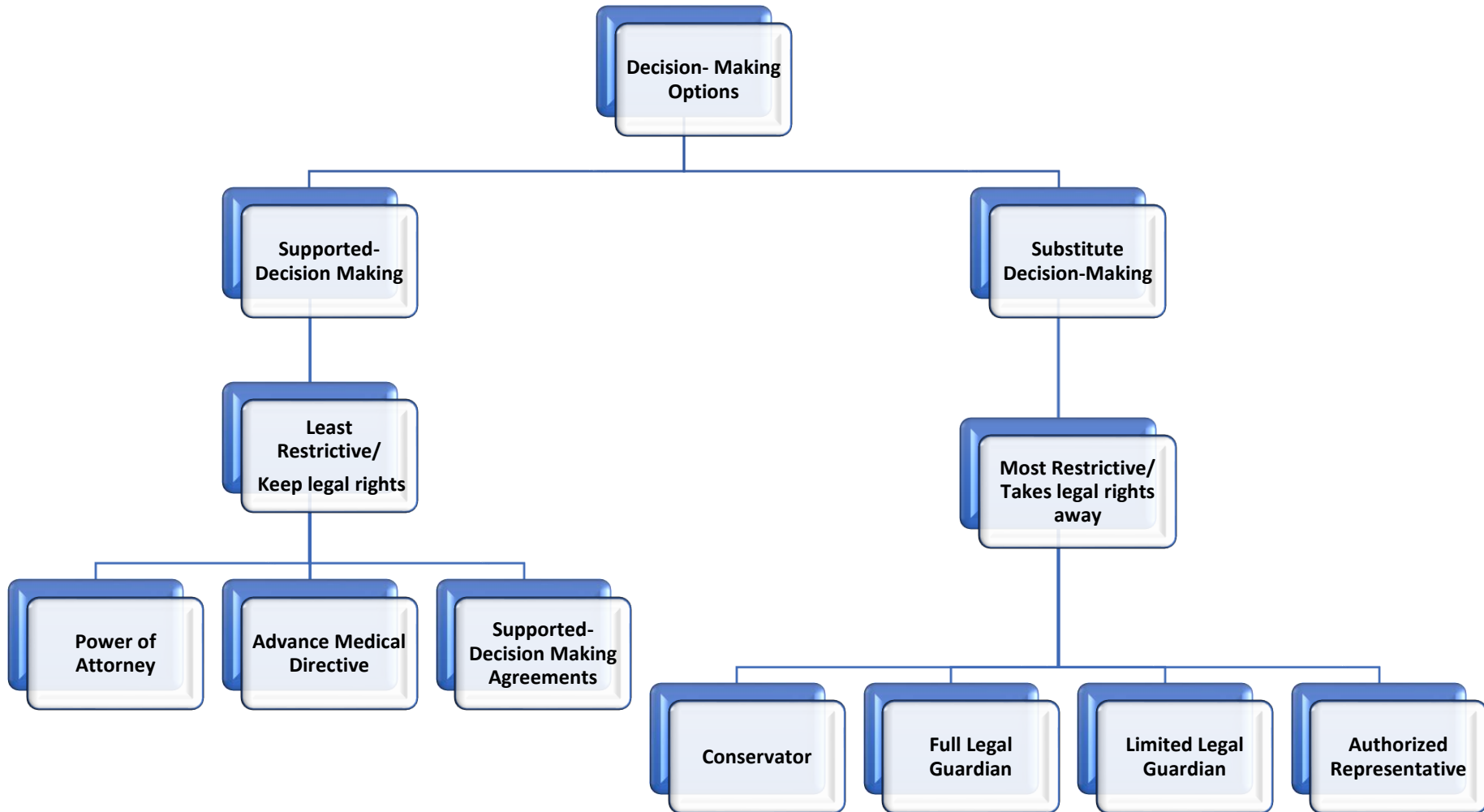


# Support with Decision Making

**You should always presume that people have capacity.** They can tell everything about themselves, handle their own affairs, and make informed decisions about their goals and support needs to the same degree as someone who does not have a disability.

Sometimes, a person may want/need the input from others who know them well. This can come from family or friends, who may choose to use a **Supported Decision-Making Agreement**, or from a conservator, authorized representative or legal guardian.

# Support with Decision Making





# Support with Decision Making

dbhds.virginia.gov

An Agency of the Commonwealth of Virginia

Virginia Department of Behavioral Health & Developmental Services

Home Getting Help Offices About DBHDS Contact Us

**BEHAVIORAL HEALTH**

- Community Services Boards (CSBs)
- Child and Family Services
- Mental Health Services
- Office of Recovery Services
- Office of Behavioral Health Wellness (OBHW)
- Military Service Members, Veterans and Families
- Substance Use Disorder Services
- Virginia DBHDS Bed Registry
- Hospital Transparency Pricing

**DEVELOPMENTAL SERVICES**

- Early Intervention for Infants and Toddlers
- Office of Integrated Health
- Developmental Disability Service System
- Individual and Family Support Program (IFSP)
- Intermediate Care Facilities for Individuals with Developmental Disabilities (ICF/IID)
- Housing
- Employment
- Waiver Services
- My Life My Community

Support Coordination/Case Management

**Resources**

- Supported Decision-Making**
- Victims of Eugenics Sterilization Compensation Program
- Provider Development
- Public Guardianship for Individuals with Intellectual and Developmental Disabilities
- Centralized Training For Providers
- Crisis Services
- COVID – 19


<https://dbhds.virginia.gov/supported-decision-making-supported-decision-making-agreements/>



Supported Decision-Making and Supported Decision-Making Agreements

Home > Supported Decision-Making and Supported Decision-Making Agreements

Virginia now formally recognizes Supported Decision-Making Agreements as an alternative to more restrictive, substitute decision-making options, such as legal guardianships. Supported Decision-Making Agreements are a way for adults with developmental disabilities living in Virginia to document when they want to receive support with making decisions, how they want to receive support, and who they want to help them. Supported Decision-Making Agreements give individuals with developmental disabilities the ability to receive support with making various choices in their lives, while also retaining all of their rights, including the right to make their own decisions.



For questions regarding Supported Decision-Making and/or Supported Decision-Making Agreements please contact Sara Thompson at [Sara.Thompson@dbhds.virginia.gov](mailto:Sara.Thompson@dbhds.virginia.gov).

Virginia's Supported Decision-Making Agreement template and Supplemental Documents/ Acuerdo para la toma de decisiones con apoyo del Estado de Virginia – Plantilla

English

Español

Español

**Making My Own Decisions- It's My Right!**

Everyone has the right to meaningfully participate in making decisions about their life. Human Rights Regulations say that anyone who has capacity (can take in information, make a decision using that information, and then communicate their decision to others) can consent (agree) to services, treatment, or research, or agree to others to see and/or get information about them. Even if you have capacity, you still might want help with making some decisions and that is okay. If you have questions about your right to make decisions or about your other rights, please see information on the Office of Human Rights' website by clicking [here](#).

Training Videos and Documents

- Supported Decision-Making and Supported Decision-Making Agreements: An Overview Trainings (June 2022)
- Supported Decision-Making and Supported Decision-Making Agreements: The Details Trainings (August 2022)
- PEATC Series: 3 Discovery Tools and the Virginia Supported Decision Making Agreement template (January-February 2023)

To get more help with decision-making options and supported decision-making agreements click on these RESOURCES:

- American Civil Liberties Union (ACLU)
- Disability Law Center of Virginia
- National Resource Center for Supported Decision-Making
- Parent, Educational, Advocacy, Support Center (PEASCI)
- The Arc of Northern Virginia
- The Arc of Virginia
- Virginia Department of Education
- Virginia WINGS booklet

# Resource Page

# Resource Page

- Home and Community Based Settings Regulation :  
<https://www.dmas.virginia.gov/for-providers/long-term-care/waivers/home-and-community-based-services-toolkit/>
- CRC Listing for Virginia: [CRC Listing 7.8.22](#)
- Listserv / Constant Contact: [Sign up for Listserv - Constant Contact](#)
- Person Centered Practices: <https://personcenteredpractices.partnership.vcu.edu>
- Provider search:[Index - Virginia Medical Portal \(vaxix.net\)](#)
- My Life My Community Provider Database:  
<https://mylifemycommunityvirginia.org/taxonomy/mlmc-menu-zone/find-provider>
- DBHDS provider search  
[VADBHDS / Virginia Department of Behavioral Health and Developmental Services \(glsuite.us\)](#)
- State Transition Plan  
[http://www.dmas.virginia.gov/Content\\_pgs/HCBS.aspx](http://www.dmas.virginia.gov/Content_pgs/HCBS.aspx)

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# Thank you!