Waiver Eligibility

Recipients must meet all of the following criteria:

- Be an eligible client of DDA per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
  - If a child, parent's income and resources are not considered
  - If an adult living with a spouse, the spouse's income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities (HWD) program.
- Meet the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) as determined by the DDA assessment.
- Person-centered service plan (PCSP) shows how health, safety, and habilitation needs can be met in the community with a monthly waiver service and/or monitoring.
- Agree to accept home and community-based services rather than an ICF/IID.
- For IFS only, recipients must:
  - Be age 3 or older; and
  - Live in the family home. This means living with at least one other family member; spouse, natural, adoptive or stepparent, child stepchild, sibling, step sibling, aunt, uncle, grandparent, first cousin, niece or nephew.

Access to a Waiver

A request for enrollment, or to switch to an alternate waiver can be done at any time. Ask a case resource manager (CRM). If a CRM is not available, leave a message on the local No-Paid Service line listed under Regional Offices or submit the request on-line at **www.dshs.wa.gov/dda/service-and-information-request**. Meeting service criteria for the waiver does not guarantee access to waiver services. Each waiver is limited on the number of people who can be served. DDA has the authority to limit enrollment based on the availability of funding for new waiver participants.

Administrative Hearing Rights

Everyone has the right to an administrative hearing with any of the following decisions regardless of program or service:

- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on an application; or
- Type or amount of service authorized to receive; or
- Denial, reduction, or termination of services; or
- Denial of choice of service provider; or
- If moved to a different residential setting, not of one's choice; or
- DDA refusal to abide by request not to send notices to any other person; or
- Disenrollment from a waiver program; or
- Denial of request to receive ICF/IID services instead of waiver services; or
- DDA decides the services available on current waiver can meet health and welfare needs and person disagrees; or
- One has been assessed to not meet CIIBS eligibility.

Visit us online at:
dshs.wa.gov/dda/service-and-information-request

Find an office at:
dshs.wa.gov/DDA/dda/ find-an-office

Call us:

Counties	Phone and Email
Chelan, Douglas, Ferry, Grant, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens	(800) 319-7116 R1ServiceRequestA@dshs.wa.gov
Adams, Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, Yakima	(866) 715-3646 R1ServiceRequestB@dshs.wa.gov
Island, San Juan, Skagit, Snohomish, Whatcom	(800) 567-5582 R2ServiceRequestA@dshs.wa.gov
King	(800) 974-4428 R2ServiceRequestB@dshs.wa.gov
Kitsap, Pierce	(800) 735-6740 R3ServiceRequestA@dshs.wa.gov
Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Skamania, Thurston, Wahkiakum	(888) 707-1202 R3ServiceRequestB@dshs.wa.gov

People needing support with hearing or communication can call the Washington Telecommunication Relay Service by dialing 7-1-1 or 1-800-833-6388 (TTY).

Washington State Department of Social & Health Services

Transforming lives

DSHS 22-1758 (5/18)

Individual and Family Services Waiver

From the Developmental Disabilities Administration

Washington State Department of Social & Health Services

Transforming lives

Waiver Overview

Department of Social and Health Services' Developmental Disabilities Administration (DDA) has five Home and Community-Based Service (HCBS) Medicaid Waiver programs. Each waiver offers specific services to meet health and safety needs in the community. The individual and family services (IFS) waiver offers a variety of services when they are not available through any other resource (private insurance, Medicaid, school, etc.)

Individual and Family Services (IFS) Waiver supports individuals who require waiver services to remain in the family home. Individuals must be age three or older and live with a family member. Services are limited by the amount of the annual allocation which is determined by the DDA assessment ($1,200; $1,800; $2,400; or $3,600).

If the assessed need for services exceeds the scope of service provided under the IFS waiver, DDA will make one or more of the following efforts to meet health and welfare needs:

- Identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the IFS waiver other than natural supports;
- Offer the opportunity to apply for an alternative waiver that has the services needed;
- Offer placement in an ICF/IID .

If none of the above options meet health and welfare needs, DDA may terminate waiver eligibility. Once terminated from a waiver, a person may still be eligible for other non-waiver DDA services.

Waiver Services

Use this brochure for planning your annual assessments. A case resource manager (CRM) will explain services and document services selected in the person-centered service plan (PCSP). Some services require review and approval before one can receive them. Ask a CRM about what information is needed for prior approval. Services in four categories with *waiver and age limits* include:

- *Community services* – promote client participation and integration in the community
- *Professional services* – support services provided by contracted professionals
- *Caregiving services* – supports for participants and their caregivers
- *Goods and services* – equipment, supplies and specialized services for participants

Use check boxes to show the CRM which services are of interest:

Community Services

☐ **Community engagement** – services to increase connections and engagement in formal and informal community supports.

☐ **Peer mentoring** – peer mentors use personal experiences to provide support and guidance.

☐ **Person-centered plan facilitation** – a life-planning process to increase personal self-determination and develop an action plan.

☐ **Transportation** – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCSP.

Professional Services

☐ **Behavioral health stabilization services** – services to assist and support during a behavioral health crisis. Includes positive behavior support and consultation and specialized psychiatric services.

☐ **Positive behavior support and consultation** – supports that assess and address behavioral health needs. These include direct interventions to improve quality of life and community inclusion.

☐ **Risk assessment** – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.

☐ **Specialized psychiatric services** – psychiatric services specific to the needs of individuals with a developmental disability. *21+*

☐ **Staff/family consultation and training** – professional training and consultation to family and direct service providers to better meet needs. Counseling available.

☐ **Therapies** – occupational, physical and speech, language and hearing services beyond those provided by Medicaid (Apple Health). *21+*

Caregiving Services

☐ **Respite** – short-term relief to individuals who live with and care for persons with disabilities.

☐ **Skilled nursing** – chronic, long-term, nursing services to address needs not met through Medicaid (Apple Care). *21+*

Goods and Services

☐ **Assistive technology** – products and training used to improve or maintain functional abilities.

☐ **Environmental adaptations** – physical modification necessary for one to continue living in the community.

☐ **Specialized clothing** – non-restrictive clothing adapted to the needs related to the disability.

☐ **Specialized medical equipment and supplies** – medically necessary equipment and supplies not available under Medicaid (Apple Care).

☐ **Therapeutic equipment and supplies** – equipment and supplies needed to implement therapeutic or positive behavioral support plan.

☐ **Vehicle modifications** – adaptations to a vehicle that accommodates needs and supports community integration.

☐ **Wellness education** – monthly, individualized, printed educational letter designated to assist in managing health-related issues and achieving wellness goals.