

# Virginia Department of Medical Assistance Services (DMAS)

## Family and Individual Support (FIS) Waiver

### Fact Sheet 2018

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<b>Initiative</b>	Formerly the Individual and Family Developmental Disabilities Support Waiver, the purpose of the Family and Individual Support home and community-based (1915(c)) waiver is to provide supports and services in the community rather than in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) or related condition.
<b>Targeted Population</b>	Adults and children who have a diagnosis of a Developmental Disability (DD). All individuals must:  <ol style="list-style-type: none"><li>(1) Meet the ICF level of care criteria;</li><li>(2) Require waiver services within 30 days; and</li><li>(3) Have a diagnosis of a developmental disability</li><li>(4) Be determined that community-based services under the waiver are the critical services that enable the individual to delay or avoid placement in an ICF or promote exiting from either an ICF or other institutional placement.</li></ol>
<b>Program Administration</b>	The program is administered by the Department of Behavioral Health and Developmental Services (DBHDS) and the Department of Medical Assistance Services (DMAS)
<b>Eligibility</b>	The individual must be eligible for Medicaid and meet screening criteria; the income limit is 300% of the SSI payment limit for one person. The individual must meet criteria for ICF; and must have a diagnosis of DD.
<b>Services Available</b>	<ul style="list-style-type: none"><li>• Companion Services – Agency-Directed and Consumer-Directed</li><li>• Assistive Technology</li><li>• Case Management (through State Plan Option)</li><li>• Crisis Services: Center Based, Community Based, &amp; Crisis Support</li><li>• Community Coaching</li><li>• Community Engagement</li><li>• Electronic Home Based Supports</li><li>• Group Day Support Services</li><li>• Environmental Modifications</li><li>• Individual and Family/Caregiver Training</li><li>• In-home Support Services</li><li>• Personal Assistance Services – Agency-Directed and Consumer-Directed</li><li>• Personal Emergency Response System (PERS)</li><li>• Residential Services: Supported Living, Shared Living</li><li>• Respite Services – Agency-Directed and Consumer-Directed</li><li>• Skilled &amp; Private Duty Nursing</li><li>• Services Facilitation</li><li>• Group and Individual Supported Employment Therapeutic Consultation</li><li>• Transition Services</li><li>• Workplace Assistance Services</li></ul>
<b>Service</b>	An individual or the individual’s representative is screened at the local Community Services

**Authorization** Board (CSB). DBHDS performs enrollment and service authorization for this waiver.

**Waiting List** A single statewide wait list exists for all three Developmental Disability Waivers including the Family & Individual Supports Waiver.

In order to ensure waiver services are provided to those with the most urgent needs, the support coordinator/case manager will identify, after discussion with the individual and family, the priority status that best reflects the individual's situation. A Waiver Slot Assignment Committee will determine from among the individuals who meet priority one criteria who should be served first, based on the needs of the individual at the time a slot becomes available.

In addition, an individual shall be considered to meet the criteria for slot assignment if:

- the individual meets waiver diagnostic and functional eligibility requirements,
- the individual is determined to meet one of the Priority One criteria below, and the individual, the individual's spouse or the parent of an individual who is a minor child would accept services within 30 days.

**Wait List  
Criteria**

**Priority One**

It is anticipated that the individual will need waiver services within one year and the individual meets one of the following criteria:

- An immediate jeopardy exists to the health and safety of the individual due to the unpaid primary caregiver having a chronic or long-term physical or psychiatric condition or conditions that significantly limit the ability of the primary caregiver or caregivers to care for the individual; there are no other unpaid caregivers available to provide supports.
- There is immediate risk to the health or safety of the individual, primary caregiver, or other person living in the home due to either of the following conditions:
  - The individual's behavior or behaviors, presenting a risk to himself or others, cannot be effectively managed by the primary caregiver or unpaid provider even with support coordinator/case manager-arranged generic or specialized supports; or
  - There are physical care needs or medical needs that cannot be managed by the primary caregiver even with support coordinator/case manager-arranged generic or specialized supports;
- The individual lives in an institutional setting and has a viable discharge plan; OR
- The individual is a young adult who is no longer eligible for IDEA services and is transitioning to independent living. After individuals attain 27 years of age, this criterion shall no longer apply.

**Priority Two**

It is anticipated that the individual may require waiver services in one to five years and the individual meets one of the following criteria:

- The health and safety of the individual is likely to be in future jeopardy due to
  - The unpaid primary caregiver or caregivers having a declining chronic or long term physical or psychiatric condition or conditions that significantly limit his ability to care for the individual;
  - There are no other unpaid caregivers available to provide supports; and
  - The individual's skills are declining as a result of lack of supports;
- The individual is at risk of losing employment supports;
- The individual is at risk of losing current housing due to a lack of adequate supports

- and services; or
- The individual has needs or desired outcomes that with adequate supports will result in a significantly improved quality of life.

### **Priority Three**

Priority Three shall be assigned to individuals who meet one of the following criteria and will need a waiver slot in five years or longer as long as the current supports and services remain:

- The individual is receiving a service through another funding source that meets current needs;
- The individual is not currently receiving a service but is likely to need a service in five or more years; or
- The individual has needs or desired outcomes that with adequate supports will result in a significantly improved quality of life.

### **Definitions** (12VAC30-120-1000 *et seq.*)

**"Assistive technology"** means specialized medical equipment and supplies including those devices, controls, or appliances specified in the plan of care but not available under the State Plan for Medical Assistance that enable individuals to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live, or that are necessary to the proper functioning of the specialized equipment.

**"Case management"** means the assessing and planning of services; linking the individual to services and supports identified in the Individual Support Plan; assisting the individual directly for the purpose of locating, developing or obtaining needed services and resources; coordinating services and service planning with other agencies and providers involved with the individual; enhancing community integration; making collateral contacts to promote the implementation of the Individual Support Plan and community integration; monitoring to assess ongoing progress and ensuring services are delivered; and education and counseling that guides the individual and develops a supportive relationship that promotes the Individual Support Plan.

**"Companion services"** means nonmedical care, supervision and socialization provided to an adult (age 18 and older). The provision of companion services does not entail hands-on care. It is provided in accordance with a therapeutic goal in the plan of care and is not purely diversional in nature.

**"Consumer-directed services"** means personal care, companion services, and/or respite care services where the individual or his family/caregiver, as appropriate, is responsible for hiring, training, supervising, and firing of the employee or employees.

**"Center-based crisis support services"** means crisis prevention and stabilization in a crisis therapeutic home using planned and emergency admissions. They are designed for those individuals who need on-going crisis supports.

**"Community-based crisis support services"** means services to individuals who are experiencing crisis events putting them at risk for homelessness, incarceration, hospitalization or danger to themselves or others. This service shall provide ongoing supports to individuals in their homes and in community settings.

**"Crisis support services"** means intensive supports by trained and, where applicable, licensed staff in crisis prevention, crisis intervention, and crisis stabilization to an individual who is experiencing an episodic behavioral or psychiatric event in the community which has the

potential to jeopardize the current community living situation.

**“Community Coaching”** means a service designed for individuals who need one-to-one support in order to develop a specific skill to address barriers preventing that individual from participating in the community engagement services.

**“Community Engagement”** means services that support and foster individuals' abilities to acquire, retain, or improve skills necessary to build positive social behavior, interpersonal competence, greater independence, employability, and personal choice necessary to access typical activities and functions of community life such as those chosen by the general population.

**“Group Day support”** means training in intellectual, sensory, motor, and affective social development including awareness skills, sensory stimulation, use of appropriate behaviors and social skills, learning and problem solving, communication and self care, physical development, services and support activities. These services take place outside of the individual's home/residence.

**“Group supported employment services”** means continuous support provided by staff in a naturally occurring place of employment to groups of two to eight individuals with developmental disabilities and involves interactions with the public and coworkers who do not have developmental disabilities.

**“Individual supported employment”** means one-on-one ongoing supports that enable individuals, for whom competitive employment at or above the minimum wage is unlikely absent the provision of supports, to work in an integrated setting.

**“Electronic Home Based Supports”** means goods and services based on current technology, such as Smart Home ©, and includes purchasing electronic devices, software, services and supplies not otherwise covered through other benefits in this waiver or through the State Plan that allows individuals to use technology in their residences to achieve greater independence, self-determination and reduce the need for human intervention.

**“Environmental modifications”** means physical adaptations to a house, place of residence, primary vehicle or work site, when the work site modification exceeds reasonable accommodation requirements of the Americans with Disabilities Act, necessary to ensure individuals' health and safety or enable functioning with greater independence when the adaptation is not being used to bring a substandard dwelling up to minimum habitation standards and is of direct medical or remedial benefit to individuals.

**“Individual and family/caregiver training”** means training and counseling services to individuals, families, or caregivers of individuals enrolled in the waiver including participation in training opportunities designed to improve the family's or caregiver's ability to care for and support the individual enrolled in the waiver. This service shall also provide training opportunities for the individual to better understand his disability, and increase his self-determination and self-advocacy.

**“In-home support services”** means support provided primarily in the individual's home, which includes training, assistance, and specialized supervision to enable the individual to maintain or improve his health; assisting in performing individual care tasks; training in activities of daily living; training and use of community resources; providing life skills

training; and adapting behavior to community and home-like environments.

**"Personal Assistance Services"** means long-term maintenance or support services necessary to enable individuals to remain in or return to the community rather than enter an Intermediate Care Facility for the Mentally Retarded. Personal care services include assistance with activities of daily living, instrumental activities of daily living, access to the community, medication or other medical needs, and monitoring health status and physical condition. This does not include skilled nursing services with the exception of skilled nursing tasks that may be delegated in accordance with 18VAC90-20-420 through 18VAC90-20-460 and Act (§ 54.1-3000 et seq. of *The Code of Virginia*).

**"Personal emergency response system (PERS)"** is an electronic device that enables certain individuals to secure help in an emergency. PERS services are limited to those individuals who live alone or are alone for significant parts of the day and who have no regular caregiver for extended periods of time, and who would otherwise require extensive routine supervision.

**"Private Duty Nursing"** means individual and continuous nursing care to individuals that may be provided, concurrently with other services, due to the medical nature of supports required by individuals who have a serious medical condition or complex health care needs, or both, and which has been certified by a physician as medically necessary to enable the individual to remain at home rather than in a hospital, nursing facility, or ICF/IID.

**"Respite Services"** means services provided for unpaid caregivers of eligible individuals who are unable to care for themselves and are provided on an episodic or routine basis because of the absence of or need for relief of those unpaid persons who routinely provide the care

**"Skilled nursing services"** means nursing services (i) listed in the plan of care that do not meet home health criteria, (ii) required to prevent institutionalization, (iii) not otherwise available under the State Plan for Medical Assistance, (iv) provided within the scope of the state's Nursing Act (§ 54.1-3000 et seq. of *The Code of Virginia*) and Drug Control Act (§54.1-3400 et seq. of *The Code of Virginia*), and (v) provided by a registered professional nurse or by a licensed practical nurse under the supervision of a registered nurse who is licensed to practice in the state. Skilled nursing services are to be used to provide training, consultation, nurse delegation as appropriate and oversight of direct care staff as appropriate.

**"Therapeutic consultation"** means consultation provided by members of psychology, social work, rehabilitation engineering, behavioral analysis, speech therapy, occupational therapy, psychiatry, psychiatric clinical nursing, therapeutic recreation, or physical therapy or behavior consultation to assist individuals, parents, family members, in-home residential support, day support and any other providers of support services in implementing a plan of care.

**"Transition services"** means set-up expenses for individuals who are transitioning from an institution or licensed or certified provider-operated living arrangement to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses.

**"Workplace Assistance Services"** services means supports provided to an individual who has completed job development and completed or nearly completed job placement training (i.e. supported employment) but requires more than the typical job coach services to maintain stabilization in his employment. These services are supplementary to individual supported employment services.

<b>Quality Management Review</b>	DMAS conducts quality management reviews of the services provided and interview individuals for all providers providing services in this waiver to ensure the health and safety of all individuals. Level of Care reviews are performed at least annually by the CSB support coordinator/case manager.
<b>Reimbursement Rates</b>	Reimbursement rates can be found on the DMAS website at <a href="http://www.dmas.virginia.gov/Content_attachments/My%20Life%20My%20Community%20Rate%20File%20Updated%2012_19_17.pdf">http://www.dmas.virginia.gov/Content_attachments/My%20Life%20My%20Community%20Rate%20File%20Updated%2012_19_17.pdf</a>
<b>Number of Individuals Served (SFY 2017)</b>	1,193*
<b>Total Waiver Expenditures (SFY 2017)</b>	\$36,808,172*
<b>Average Cost Per Recipient (SFY 2017)</b>	\$30,853*
<b>Regulatory Basis</b>	12VAC30-120-700 et seq.
<b>Program Contact</b>	Sam Pinero, Waiver Operations Manager at DBHDS at (804) 786-2149 or by email at Sam.Pinero@dbhds.virginia.gov. Information is on the DMAS website at <a href="http://www.dmas.virginia.gov">www.dmas.virginia.gov</a> or the DBHDS website at <a href="http://www.dbhds.virginia.gov/">http://www.dbhds.virginia.gov/</a> .

*\*Cost-effectiveness Summary of Virginia's 1915(c) Home- & Community-Based Waivers SFY 2017 Waiver Report, Costs per Person*