

# Home and Community-Based Services Overview: Medicaid HCBS Waiver Services

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# Division of Developmental Disabilities (DDD)

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- DDD is responsible for the delivery of:
  - Medicaid Home and Community-Based Services (HCBS) Waiver programs
  - State-Operated Services (BSDC)
  
- DDD's responsibilities in administering the HCBS Waivers includes:
  - Determining eligibility
  - Providing funding
  - Providing oversight

To help maximize federal funding, participants must:

1. Apply for and accept federal Medicaid benefits.
2. Use benefits from other funding sources within DHHS, the State Department of Education, NebraskaVR (vocational rehabilitation), and other agencies.

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# Medicaid HCBS Waiver

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DDD administers four Medicaid HCBS waivers, which provide different service options to the populations eligible for each.

- Waivers allow the state to **waive** certain Medicaid requirements in order to provide an array of home and community-based services that promote community living for Medicaid beneficiaries and thereby, **avoid institutionalization**.
  
- Institutionalization for Medicaid purposes means:
  - Hospital
  - Intermediate Care Facility for people with Intellectual disability (ICF/ID)
  - Nursing Facility (NF)
  - Inpatient psychiatric services – Under age 21
  - Institution for mental diseases (IMD)– age 65 or older

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# Level of Care

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- Each state establishes its own criteria for admissions to the “institutions” listed on the previous slide that Medicaid covers.
  
- This admission criteria is known as a: **Level of Care (LOC)**. In order for a person to receive services in such a facility or alternatively in the community, they must meet the States LOC criteria.
  - For example.....a 45 yr. old, with no underlying health conditions, or limitations in daily living, can not just choose to live in a nursing facility and have Medicaid pay. They need to be assessed by the State as meeting that level of care.
  
- People on Medicaid in Nebraska who have been assessed as meeting the LOC criteria for either a Nursing Facility or IFC/IDD can choose admission to those facilities **OR** elect to receive similar supports through a HCBS Wavier in the community.  
*(assuming all other eligibility criteria is met and funding is available)*

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# Medicaid HCBS Waiver Participants

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- When a person is receiving waiver services, they are participating in the waiver.
- All participants on a Medicaid HCBS Waiver must be receiving and maintain Medicaid eligibility.
- All participants must meet the Level of Care requirement for the waiver they receive (Nursing Facility or ICF/IDD).
- A person may meet eligibility requirements for more than one waiver, but may only receive services under one waiver at a time.

**Participant:** a person receiving Medicaid HCBS Waiver services

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# Medicaid HCBS Waivers in Nebraska

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- Comprehensive Developmental Disabilities Waiver (CDD Waiver)
  - Available to people of all ages who are eligible for DD services per NE statute and meet ICF/DD level of care.
- Developmental Disabilities Adult Day Waiver (DDAD Waiver)
  - Available to people age 21 and older who are eligible for DD services per NE statute and meet ICF/DD level of care.
- Waiver for Aged and Adults and Children with Disabilities (AD Waiver)
  - Available to people of all ages who are eligible for Medicaid and who meet nursing facility level of care.
- Traumatic Brain Injury Waiver (TBI Waiver)
  - Available to people ages 18 through 64 who are eligible for Medicaid and who meet nursing facility level of care; and
  - Want to live in assisted living.

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# Medicaid HCBS Developmental Disabilities Waivers

Comprehensive Developmental Disabilities Waiver (CDD Waiver)  
Developmental Disabilities Adult Day Waiver (DDAD Waiver)

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# DD Waiver Services

## Available Waiver Services:

- Adult Day
- Assistive Technology
- Behavioral In-Home Habilitation
- Consultative Assessment
- Enclave
- Environmental Modification Assessment
- Habilitative Community Inclusion
- Habilitative Workshop
- Home Modification
- Homemaker
- Independent Living
- Medical In-Home Habilitation
- Personal Emergency Response System (PERS)
- Prevocational
- Residential Habilitation (Host Home, Shared Living, and Group Home)
- Respite
- Supported Employment – Follow-Along
- Supported Employment – Individual
- Supported Family Living
- Transitional
- Transportation
- Vehicle Modification

When a person is receiving DD Waiver services, they have a Service Coordinator who is an employee of DDD.



# DD Waiver Service Types

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Most DD services fall into two main categories, though not all fall into these groups.

- **Day Services** focus on daytime community inclusion and integration. Services may:
  - Teach job skills prior to becoming employed
  - Provide support at a job
- **Residential Services** focus on independent living skills. Services may occur:
  - In the participant's home
  - In their family home
  - At a provider-operated home

**Habilitation:** The assisting of a person with improving and achieving developmental skills when impairments have caused delaying or blocking of initial acquisition of the skills.

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# DD Waiver Eligibility Requirements

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To be eligible to receive developmental disabilities services, a person must:

- Be a citizen or legal resident of US
- Be a legal resident of the State of Nebraska
- Have a developmental disability as defined in [Neb. Rev. Stat. §83-1205](#):
  - A severe, chronic disability, including intellectual disability, other than mental illness, which is attributable to a mental or physical impairment; and
  - Substantial limitations in each of the 3 areas: conceptual skills, social skills, and practical skills.

A developmental disability must begin before age 22 and the need for services and supports is expected to be lifelong.

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# Applying for DD Waiver Services

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- DDD aims to provide accurate eligibility determinations in a timely manner.
- The application is simple. It includes a release of information so DDD can contact identified medical and educational professionals to obtain records.
- Anyone can help a person fill out an application.
- The application must be signed by the applicant, their guardian, or a legal representative.
- Application can be submitted:
  - Online at AccessNebraska [www.ACCESSNebraska.ne.gov](http://www.ACCESSNebraska.ne.gov)
  - At any local DHHS office
  - By mail or fax with a paper application

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# DD Eligibility Determination and Level of Care

When DDD receives an application:

- Within two days, a Disability Services Specialist (DSS) calls the applicant to verify the information on the application.
- The DSS requests documents from schools, doctors, and others listed.
- When documents arrive, or after 30 days, eligibility is determined.
- When a person is determined DD eligible, the Level of Care assessment is completed.
  - DD Level of Care is based on the level of care needed to live in an Intermediate Care Facility for individuals with Developmental Disabilities (ICF/DD).
  - The Developmental Index is the assessment tool currently used to determine Level of Care.

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# DD Registry of Eligible Persons

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- There are not enough funds to provide Medicaid HCBS Developmental Disabilities waiver services to all eligible people in Nebraska.
- The registry tracks eligible people who want services.
  - In order to be on the registry, the eligible person:
    - Meets Level of Care with ICF/DD institutional need and
    - Is on Medicaid or under 19 years old.
  - It is organized by date of application.
  - It indicates which DD waiver the person wants.
- Eligibility is reviewed at ages 9 and 18.
- Waiver services are offered to people on the registry when funding is available.

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# DD Waiver Funding Prioritization

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## Nebraska Revised Statute 83-1216 (operative July 19, 2018):

The priorities for funding the Medicaid home and community-based services waivers:

- 1) People in immediate crisis due to caregiver death, homelessness, or a threat to the life and safety of the person;
- 2) People who have resided in an institutional setting for a period of at least twelve consecutive months and who are requesting community-based services;
- 3) People who are wards of the department or people placed under the supervision of the Office of Probation Administration by the Nebraska court system who are transitioning upon age nineteen with no other alternatives as determined by the department to support residential services necessary to pursue economic self-sufficiency;
- 4) People transitioning from the education system upon attaining twenty-one years of age to maintain skills and receive the day services necessary to pursue economic self-sufficiency;
- 5) People who are a dependent of a member of the armed forces of the United States who is a legal resident of this state due to the service member's military assignment in Nebraska; and
- 6) All other people by date of application.

# Medicaid HCBS Aged and Disabled Waiver

Waiver for Aged and Adults and Children with Disabilities (AD Waiver)

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# AD Waiver Services

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## Available Waiver Services:

- Adult Day Health Care
- Assisted Living
- Assistive Technology and Living Supports
- Childcare for Children with Disabilities
- Home Again Services
- Home Care/ Chore
- Home Delivered Meals
- Home Modifications
- Independence Skills Management
- Personal Emergency Response System
- Respite Care
- Non-Medical Transportation

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# AD Waiver Eligibility Requirements

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To be eligible to receive Aged and Disabled Waiver services, a person must:

- Be eligible for Nebraska Medicaid;
- Have a disability or be over the age of 65;
- Meet Nursing Facility Level of Care ([471 NAC](#)); and
- Have a need for waiver services.

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# Applying for AD Waiver Services

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- DHHS aims to provide accurate eligibility determinations in a timely manner.
- Referrals are made to local Service Coordination offices:
  - Early Development Network (ages 0-3)
  - DHHS (ages 3-17)
  - Area Agency on Aging or League of Human Dignity (ages 18+)
- Anyone can make a referral.
- The person, their guardian, or a legal representative must participate in the eligibility process.

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# AD Waiver Determination and Level of Care

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When Service Coordination receives a referral:

- A Service Coordinator (SC) is assigned and checks that the person is eligible for Medicaid.
- Within 14 days from receiving the referral, the SC reaches out to the person to schedule the Level of Care determination.
  - Aged and Disabled Level of Care is based on the level of care needed to live in a nursing facility.
- When the person meets the requirements, they are offered AD waiver services.

The Aged and Disabled Waiver does not have a waiting list.

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# Medicaid HCBS Traumatic Brain Injury Waiver

Traumatic Brain Injury Waiver (TBI Waiver)

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# TBI Waiver Services

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## Available Waiver Services:

- Specialized assisted living services including assistance with personal care activities and activities of daily living, such as:
  - Escort services (an escort is a person who will accompany the participant to a medical appointment if they are unable to go alone)
  - Essential shopping
  - Health maintenance activities
  - Housekeeping services
  - Laundry services
  - Provision of medications
  - Personal care services
  - Transportation services

There is one provider for this waiver, located in the Omaha area.

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# TBI Waiver Eligibility Requirements

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To be eligible to receive Traumatic Brain Injury services, a person must:

- Be eligible for Nebraska Medicaid;
- Be age 18 through 64;
- Have a diagnosis of traumatic brain injury\* (such as a blow to the head);
- Meet Nursing Facility Level of Care ([471 NAC](#)); and
- Have needs requiring the type of care necessary to treat the conditions and criteria identified in the definition of Specialized Assisted Living (SAL).

\*This program is not for acquired brain injury caused by strokes, tumors, and other non-traumatic causes.

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# Applying for TBI Waiver and Eligibility Determination

- A person seeking services from the TBI Waiver should contact the League of Human Dignity.
  - The Service Coordinator (SC) for the TBI Waiver is in the Lincoln Office.
- The person should also contact the TBI provider to see if they have the ability to support the person's needs.
- The Service Coordinator will discuss if needs would be best met from TBI Waiver or AD Waiver.
  - The SC will determine the person meets eligibility requirements, including Nursing Facility Level of Care.
- When the person is eligible and chooses a waiver, service planning begins.

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## Developmental Disabilities

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The Division of Developmental Disabilities (DDD) provides funding and oversight for Medicaid Home and Community-Based Services (HCBS) Waivers. This includes determining eligibility, providing service coordination for eligible people, monitoring services, and paying providers.

For information about available services, select the waiver you are interested in:

[Aged and Disabled Waiver](#)

[Developmental Disabilities Waivers](#)

[Traumatic Brain Injury Waiver](#)

Otherwise, select the topic you are interested in. The Participant/Family and Provider sections contain information specific to those groups.

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