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State Strategies for Determining Eligibility and Level of Care for ICF/MR and Waiver Program Participants

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State Strategies for Determining Eligibility and Level of Care for ICF/MR and Waiver Program Participants

Ric Zaharia and Charles Moseley

SUMMARY

Medicaid waiver and Intermediate Care Facility for People with Mental Retardation (ICF/MR) eligibility determination and annual level of care review policies have significant implications for state developmental disabilities agencies. Growing waiting lists for publicly financed assistance and increased demands from families and advocates to expand service availability and eligibility to new populations place considerable pressure on state policymakers to widen access to state and federally funded services. This report presents the results of a survey of state developmental disabilities agency officials regarding the determination of initial eligibility/level of care and the “annual level of care” for services furnished under Medicaid waiver and ICF/MR programs. Forty-seven (92%) states provided information on state waiver eligibility criteria and practices. Of the forty-seven states responding, twenty states (43%) reported on the use of one waiver, twenty-seven states (57%) reported on the utilization of two or more waivers in their states. Thirty-four (34) states, or 65% of the total, responded to the ICF/MR survey.

BACKGROUND

The Intermediate Care Facility for People with Mental Retardation (ICF/MR) program was established in 1971 as an optional service under states’ Medicaid programs. This amendment to the Social Security Act permitted states to receive federal matching funds for institutional programs serving only individuals with mental retardation for the first time. The ICF/MR program reached its peak spending and utilization in the early 1990s and has been in relative decline ever since.¹

The Medicaid waiver program was authorized in 1981 under Section 1915(c) of the Social Security Act to provide states with a mechanism for furnishing home and community-based alternatives to institutionalization in ICFs/MR, nursing facilities and hospitals. The program authorizes the federal government to waive certain Medicaid statutory provisions to permit states to offer home and community-based services (HCBS) to individuals who would otherwise qualify for institutional services, and are able to receive community supports at a cost that on average does not exceed the average cost of institutional care.² For persons with mental retardation and related conditions, the waived provisions allowed states to implement community-based services that might deter the need for institutionalization in ICFs/MR. Originally tied to the reduction of services and beds in ICFs/MR, the waiver program exceeded

¹ Braddock (2002).

² Section 1915(c) Medicaid waivers permit home and community based service alternatives for individuals who meet institutional level of care criteria for ICF/MR programs, nursing facilities, or hospitals.

ICF/MR utilization in terms of number of persons served in 1995.^{3,4} Home and Community-Based Services (HCBS) spending matched ICF/MR spending in 2000 and has continued to surpass it in the intervening years.⁵

Eligibility for ICF/MR services is limited to persons with mental retardation or related conditions (42 CFR 435.1010; 42 CFR 440.150). Eligibility for home and community based services furnished under Section 1915(c) or 1915(b/c) “managed care” Medicaid waiver(s) is directly linked to ICF/MR level of care. Under both the ICF/MR and Medicaid waiver programs, states must determine during the level of care evaluation process that potential service recipients: (a) have a diagnosis of mental retardation or related conditions (42 CFR 435.1010; 42 CFR 441.302); and, (b) require the level of services provided by an ICF/MR. Mental retardation is not specifically defined; related conditions are defined functionally. Eligibility for home and community-based services under the waiver program is extended to individuals who, “but for the provision of waiver services,” would otherwise require the level of support and assistance furnished by an ICF/MR program (42 CFR 442.302(c)(1)). States are required to use level of care evaluation instruments or processes for waivers that yield equivalent outcomes to those used for the ICF/MR program. After a person is admitted to the waiver program, states are required to certify at least annually that he or she continues to need the “level of care provided” (42 CFR 441.302 (c)(2)), during an annual level of care determination process.

Under the Medicaid waiver program states have considerable discretion in determining specific program or service eligibility criteria, the nature of the supports to be offered, the number of individuals to be served, the total dollar amount available to meet the needs of each recipient, and other key program parameters. State Medicaid waiver program eligibility requirements consist of the ICF/MR level of care determination, and other targeting criteria that further limit the beneficiaries that may participate in a specific waiver. Additionally, states must ascertain that the type and level of HCBS offered under a given waiver will be sufficient to meet the individual’s unique health and welfare needs. Eligibility definitions vary between states based on at least two factors. Some states utilize “categorical” eligibility criteria referencing specific related conditions by medical diagnoses or type, such as mental retardation, spina bifida, autism, etc. Other states use “functional” criteria, such as that provided by the Federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002 Sec 102)⁶ (DD Act) that are based on a person’s adaptive abilities or capacity to perform tasks at a specific level. The majority of states, however, utilize a combination of the two approaches referencing both categorical and functional criteria (see below).

³ Lakin et al 1995.

⁴ Lakin et al 2007.

⁵ Braddock, 2002.

⁶ The term “developmental disability” means a severe, chronic disability of an individual that: (i) is attributable to a mental or physical impairment or combination of mental and physical impairments; (ii) is manifested before the individual attains age 22; (iii) is likely to continue indefinitely; (iv) results in substantial functional limitations in 3 or more of the following areas of major life activity: (I) Self-care; (II) Receptive and expressive language; (III) Learning; (IV) Mobility; (V) Self-direction; (VI) Capacity for independent living; (VII) Economic self-sufficiency; and, (VIII) reflects the individual’s need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of life long or extended duration and are individually planned and coordinated (42 U.S.C. 15002 Sec 102). Note, this definition is more expansive than the regulatory definition of a related condition at 42 CFR 435.1010.

Increasing demands from families and advocates to broaden service availability and eligibility to new populations are placing pressure on policymakers in many states to widen access to state and federally funded services. In response to these and other concerns, more than seventeen state developmental disabilities agencies have implemented so-called “supports waiver” programs that utilize the provisions of the Medicaid 1915(c) waiver authority to furnish a relatively narrow range of home and community-based services to eligible individuals with particular needs or characteristics. Supports waiver programs are designed to operate in conjunction with a state’s “comprehensive” waiver program which typically offers more complete array of services.⁷ The growth of waiver programs generally, and the development of so-called “supports waivers” that limit the total cost and availability of certain types of services to eligible individuals in order to serve a larger number of people, has created a renewed interest in the criteria and definitions states use to determine program eligibility and level of care. Several states have service mandates that extend eligibility beyond the criteria set by ICF/MR and waiver programs. Arizona and Colorado, for example, serve individuals with state funds who do not meet Medicaid eligibility criteria and Connecticut has initiated a pilot program for individuals with autism utilizing only state resources. Although the use of state-only funding enables a state to expand eligibility to additional groups of individuals in need, the practice places significant pressure on state officials to explain the differential admission criteria between the various programs.

This study reports the results of a survey conducted by the National Association of State Directors of Developmental Disabilities Services (NASDDDS) of the strategies employed by state developmental disabilities agencies for determining ICF/MR and Medicaid waiver program eligibility and level of care. The report describes state practice. No attempt was made to determine the extent to which a state’s eligibility criteria or assessment procedures comply with federal regulations and requirements set in 42 CFR sections 435.1010, 440.150, and 302, or the §1915(c) HCBS waiver application and instructions.

Method

Two surveys were developed, one for ICF/MR programs and another for home and community based service waiver services. Both instruments used an electronic reporting format widely available on the World Wide Web. Each questionnaire was designed to gather and categorize data on: (a) the content of state eligibility definitions; (b) the processes used to establish eligibility; and, (c) the annual level of care determination procedures used to meet federal requirements at 42 CFR 441.302. This report captures the critical pieces of information gained from these surveys. Due to time limitations, some states were not able to respond to the project’s deadlines.

The waiver program survey included eleven (11) questions regarding eligibility and the level of care determination process. States with multiple waivers were requested to complete a separate questionnaire for each of the developmental disabilities waiver programs being operated. The ICF/MR program survey included seven (7) questions. The surveys took the average responder 20-30 minutes to complete, depending on the number of waivers being

⁷ Smith, Agosta, & Fortune (2007).

operated by the state. Both surveys solicited the definitional criteria for eligibility. The waiver survey asked the responders also to identify the clinical diagnoses accepted in their state definition. Because states may use different processes for the initial eligibility/level of care determination and their annual re-evaluations of level of care, we chose to inquire about these areas separately. Additional questions sought information on the locus of responsibility for eligibility and level of care determination and the utilization of eligibility and level of care determination information in other activities within the developmental disabilities agency (such as service planning) or by the state's Medicaid agency (such as in their Medicaid Management Information System (MMIS) system). Follow-up emails and phone calls resulted in the completion of the surveys by forty-seven states (92%) regarding their waiver programs and thirty-four states (67%) regarding their ICFs/MR.

RESULTS

HCBS Waiver Program

Forty-seven (92%) states provided information on state waiver eligibility criteria and practices.⁸ Twenty (20) states reported on the use of one waiver, twenty-seven (27) states reported on the utilization of two or more waivers in their states. Nebraska and Texas provided data on the use of five waivers, the highest number reported in this survey. All but two of the responding states reported on the use of 1915(c) waivers. Arizona and Vermont operate managed care service delivery systems under 1115 Research and Demonstration Waivers.

Eligibility Criteria

All reporting states described the evaluation and admission processes used to determine eligibility for state funded programs as well as for services furnished under the state's Medicaid waiver program. Sixteen of the 47 responding states (34%) states reported (see Exhibit 1) using a mental retardation-based definition of eligibility (Mental Retardation and Related Conditions). Thirty-one (66%) states reported using a broader, non-mental retardation based definition of eligibility (Developmental Disability) that included both functional and categorical provisions. Of the thirty-one states with non-mental retardation based eligibility definitions, eight (HI, LA, MI, NC, ND, NJ, OH, SD) used the federal definition of developmental disability included in the DD Act. The others used state specific definitions, usually with specific diagnostic categories (e.g., AZ) or an open-ended list of exemplar diagnostic categories (e.g., GA). One state (VA) reported the use of a waiver eligibility definition that specifically limited the waiver to persons with developmental disabilities but excluded persons with intellectual disabilities (mental retardation). That waiver, however, is administered directly by the state's Medicaid Agency and is, therefore, an anomaly among the waivers reported by the other states.

All 47 states reported definitions that included at least some assessment of functional ability. Only the eight states using the DD Act definition do not mention specific conditions or disabilities, instead referencing the broad area of "mental or physical impairments." The other

⁸ Waiver eligibility criteria reflect both the ICF/MR level of care determination and any additional waiver provisions.

40 states either prescribe the acceptable diagnostic categories or have created lists of acceptable categories under the “other related conditions” clause. Consequently, thirty-nine states appear to utilize eligibility definitions that are functional and categorical, while only eight states appear to employ purely functional eligibility definitions.

Table 1 displays the distribution of the responding states with respect to the diagnostic categories used in determining eligibility and level of care. The data reveals that although some states restrict eligibility to persons with diagnoses of mental retardation, most states (31) use statutory or rule-based waiver eligibility criteria that clarify the nature of the “related conditions” that qualify an individual for waiver services under the broad category heading of developmental disabilities. Respondents from eighteen states (18) reported that their states had moved away from the use of the words, “mental retardation”, in favor of more current terminology, such as “intellectual disability” or “cognitive disability.”

Table 1: Diagnoses Reported by the States for Admission into State and Waiver Programs

Diagnostic Criteria	Mental Retardation and Related Conditions	Developmental Disability
Mental Retardation, Cognitive or Intellectual Disability	AL, CT, IA, MA, ME, MN, NE, NV, OK, PA, TN, TX, UT, VA, VT, WY	AK, AR, AZ, CA, CO, DC, DE, FL, GA, HI, ID, IL, IN, KS, KY, LA, MI, MO, MS, MT, NC, ND, NH, NJ, NM, NY, OH, OR, SD, WA, WV
Cerebral Palsy	NV, PA, TX, UT, WY	AK, AR, AZ, CA, CO, DC, FL, GA, ID, IL, IN, KS, LA, MI, MO, MT, ND, NM, NH, NJ, NY, OH, OR, SD, WA
Epilepsy	PA, TX, UT, WY	AK, AR, AZ, CA, CO, DC, FL, GA, ID, IL, IN, KS, LA, MI, MO, MT, ND, NH, NJ, NM, NY, OH, SD, WA
Prader-Willi Syndrome	CT, NV, TX, UT, WY	AK, DC, DE, FL, GA, IN, KS, LA, MO, MI, MS, ND, NJ, NY, OH, OR,
Autism	MA, ME, PA, TX, UT, WY	AK, AR, AZ, CA, CO, DC, DE, FL, GA, ID, IN, KS, MI, MO, MS, MT, ND, NH, NJ, NM, NY, OH, OR, SD, WA, WV
Autism Spectrum	MA, NV, TX, UT, WY	CO, GA, IN, KS, LA, MI, MO, ND, NJ, OH, OR, SD,
Asperger’s Syndrome	MA, NV, TX, WY	DE, GA, IN, LA, MI, MO, ND, NJ, NM, OH, OR, SD

Diagnostic Criteria	Mental Retardation and Related Conditions	Developmental Disability
Pervasive Developmental Disability	MA, NV, TX, VT, UT, WY	AK, GA, IN, KS, LA, MI, MO, MS, ND, OH, OR,
Spina Bifida	UT, WY	DC, FL, GA, IN, KS, LA, MI, MO, MS, ND, NJ, NM, NY, OH, OR, WV
Fetal Alcohol Syndrome	NV, TX, UT, WY	AK, GA, IN, KS, LA, ND, NY, OH, OR, SD
TBI before 18	CT, WY	DE, IN, MO, MS, ND, NY, OR,
TBI before 22	NV, TX, UT	AK, GA, KS, LA, MO, ND, NJ, NY, OH, OR, SD, WV
At Risk before 6	NV, TN, VA	AZ, LA, ND, OH, OR
Other	MA, PA, VA	AR, CA, CO, DC, DE, ID, IN, LA, MI, MO, MT, NC, NH, NJ, NM, NY, WA

Twenty-one (21) states reported using “other” diagnostic categories to determine eligibility. Additional conditions covered by states include: dyslexia (AR), autistic disorder (ME), Retts (MA), specific learning disability (NH), familial dysautonomia (NY), deaf-blind with multiple disabilities (TX), and tuberous sclerosis (WV). The majority of states do have a catch all eligibility criterion that establishes that persons are eligible who have closely related conditions with impairments in major life activities without specifying the condition.

Initial Eligibility and Level of Care Determination Processes

Table 2 below identifies the entities responsible for determining eligibility in each of the responding states. Six states (13%) utilize subcontractors for this purpose. Eligibility is determined by another state agency, such as the state Medicaid agency, in eight states (17%). In the majority of states (33 or 70%) state agency staff complete the eligibility process.

Table 2: Initial Eligibility Determination Responsibility

Responsible Entity	State
State DD Agency Staff	AK, AL, AR, CT, DC, DE, FL, GA, HI, IA, ID, IN, KS, LA, MA, ME, MN, MO, MS, MT, ND, NE, NH, NJ, NM, NV, NY, OH, SD, TX, UT, WA, WV
Subcontractors	CA, CO, IL, VA, WY, MI

State Agency Other than DD	AZ, KY, NC, OK, OR, PA, TN, VT

Twenty-five (25) states reported using a specific process or a defined set of procedures to determine eligibility for their waivers. Twenty-two (22) states reported using a process and a specific, criterion based tool. State agencies responding to the survey reported that they used a variety of different instruments to assist in determining eligibility for Medicaid waiver services and identified the procedures used to determine the initial level of care. The majority indicated that they employed a state-specific instrument. Nationally standardized instruments in use by states include the Inventory for Client and Agency Planning (ICAP), by six states, and the Scales for Independent Behavior-Revised (SIB-R) by two states. Below is a listing of the various tools used by each of the responding states.

- | | |
|--|---|
| AK - <i>Inventory for Client and Agency Planning (ICAP)</i> | MO – <i>Missouri Critical Adaptive Behaviors Inventory (MOCABI)</i> |
| AZ – <i>PreAdmission Screening (PAS)</i> | ND – <i>Progress Assessment Review (PAR)</i> |
| CO – <i>Long Term Care Assessment (LTC-100.2)</i> | NE – <i>SIB-R</i> |
| D.C. – <i>Level of Care tool</i> | NJ – <i>Self Care Assessment Tool (SCAT)</i> |
| IA – <i>MR Functional Assessment Tool</i> | OH – <i>Ohio Eligibility Determination Instrument (OEDI)</i> |
| ID – <i>Scales for Independent Behavior-Revised (SIB-R)</i> | SD – <i>ICAP</i> |
| IL - <i>ICAP</i> | TX – <i>ICAP; Related Conditions Eligibility and Screening Instrument (RCESI)</i> |
| KS – <i>Developmental Disability Profile (DDP), Kansas Children’s Assessment</i> | UT – <i>ICAP</i> |
| KY – <i>Kentucky Medicaid Waiver Assessment (MAP 351)</i> | VA – <i>Level of Functioning tool (LOF)</i> |
| MA – <i>Massachusetts Comprehensive Assessment Process (MASSCAP)</i> | WA – <i>Supports Intensity Scale (SIS), Support Assessment for Children (SAC)</i> |
| ME – <i>Maine Assessment Referral Form (BMS99)</i> | WY– <i>ICAP</i> |

Waiver Program Level of Care Process, Responsibility and Instrumentation

The state Medicaid authority must provide assurances to the federal government that the state will verify continued eligibility and continued need for the waiver supports provided by conducting, “Reevaluations, at least annually, of each recipient...to document if the recipient continues to need the level of care provided and would, but for the provision of waiver services, otherwise be institutionalized....(42 CFR 441.302).” Table 3 summarizes the approaches of the responding states. Parenthetically, most states appear to perform the level of care determination and re-determination through the annual service planning and review process.

Table 3: Level of Care Determination in Waiver Programs: Process, Responsibility and Instruments Used

Process	States
Defined process in place but does not use a specific instrument	AK, AL, AR, AZ, CT, DE, FL, GA, HI, ID, IN, KS, LA, MI, MN, MT, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, SD, TN, UT, WV, WY
Instrument used within a defined process	CA, CO, DC, IA, IL, KY, MA, ME, MO, MS, NE, TX, VA, VT, WA
Responsibility	States
DD Agency or field staff manages the LOC	AK, AR, AZ, CT, DC, DE, FL, GA, ID, LA, MA, MO, MS, MT, ND, NE, NH, NJ, NV, NY, OH, OK, SD, TN, TX, UT, VA, WA, WV
Subcontractors handle LOC	CA, CO, IL, HI, KS, KY, MI, NC, PA, WY
Other Agency than DD handles LOC	IA, IN, ME, MN, NM, OR, PA, VT
Instruments Used	
CA – <i>Client Development Evaluation Report (CDER)</i> CO – <i>Long Term Care Assessment (LTC-100.2)</i> D.C. – <i>Level of Care tool</i> IA – <i>MR Functional Assessment Tool (MRFAT)</i> ID – <i>Scales of Independent Behaviors-</i>	MO – <i>Missouri Critical Adaptive Behaviors Inventory (MOCABI)</i> MS – <i>Inventory for Client and Agency Planning (ICAP)</i> NE – <i>SIB-R</i> WA – <i>Support Intensity Scale (SIS), Support Assessment for Children (SAC)</i> TX – <i>ICAP</i>

<p><i>Revised (SIBR)</i></p> <p>KY – <i>Kentucky Medicaid Waiver Assessment (MAP351)</i></p> <p>MA – <i>Massachusetts Comprehensive Assessment Process (MASSCAP)</i></p> <p>ME – <i>Maine Assessment Referral Form (BMS-99)</i></p>	<p>VA – <i>Level of Functioning tool (LOF)</i></p> <p>VT – <i>Needs Assessment/Periodic Review</i></p>
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Thirty-six (36) states responded to a question about the use of information gathered through the eligibility determination and/or level of care determination process. Twenty-seven (27) states reported that this information is used in individual service planning, resource allocation, individual budgeting, or other service delivery activities. Nine (9) states reported that the information was not used for other purposes.

Twenty-seven (27) states responded to a question about the usage of eligibility or level of care determination information by the state Medicaid agency. Twenty-two (22) states reported using the information, typically in eligibility determination and verification processes within the Medical Management Information Systems (MMIS). Five states did not report any significant utilization of this information by or with their state Medicaid agency.

ICF/MR Program

Eligibility and Initial Level of Care Determination Process

Thirty-four (34) states, or 67%, responded to the ICF/MR survey. Alaska is the only state in the nation that does not operate an ICF/MR program. Given that another half dozen of the non-responding states have no state-operated ICFs/MR and/or shrinking numbers of privately operated ICFs/MR, the true response rate is estimated to be closer to 78%. Twenty-one (21) states use a defined process for determining ICF/MR eligibility. Ten (10) states reported that they utilize a prescribed tool and a defined process for determining eligibility. As is noted above, states use a variety of instruments to determine eligibility for ICF/MR services. Table 4 displays the states responding and includes the tools mentioned as being used in their states. It also records the locus of responsibility for ICF/MR eligibility determination.

Table 4: ICF/MR Eligibility and Initial Level of Care Determination Process, Responsibility and Instrumentation

Process	States
Defined process in place but does not use a specific instrument	AR, CT, DE, FL, HI, IA, KY, MI, MN, MO, MT, NC, NJ, NM, NV, NY, OK, OR, PA, UT, WY

Instrument used within a defined process	AZ, CO, ID, IL, LA, MA, ND, TX, VA, WA,
Responsibility	States
DD Agency or field staff	AR, CT, DE, FL, HI, ID, KY, LA, MA, MI, MO, ND, NJ, NM, NV, NY, OK, OR, TX, UT, WA, WY
Subcontractors	CO, IA, IL, VA
Other Agency than DD	AZ, MN, MT, NC, PA
Instruments Used	
AZ – <i>Pre-Admission Screening (PAS)</i> CO – <i>Long Term Care Assessment (LTC-100.2)</i> ID – <i>Scales of Independent Behavior-Revised (SIB-R)</i> IL – <i>Inventory for Client and Agency Planning (ICAP)</i> LA – <i>ICAP; DD-Support Needs Assessment Profile (DD-SNAP)</i>	MA - <i>MASSCAP</i> MN – <i>DHS-3067 (DD Screening tool)</i> ND – <i>Progress Assessment Review (PAR)</i> TX - <i>ICAP</i> WA – <i>Support Intensity Scale (SIS), Support Assessment for Children (SAC)</i>

Similarly, for the required “periodic re-evaluation” of level of care, Table 5 lists the seven (7) states that do use a tool in the level of care review process and the twenty-four (24) states that do not use a tool but follow a defined process. It also records the locus of responsibility for eligibility determination in the responding states, the majority of which retain responsibility within the developmental disabilities agency.

Table 5: ICF/MR Annual Level of Care Determination Process, Responsibility and Instrumentation

Process	States
Defined process in place but no tool	AZ, CT, DE, FL, HI, IA, KY, LA, MI, MN, MO, MT, NC, ND, NJ, NM, NV, NY, OK, OR, PA, UT, VA, , WY
A tool is used within a defined process	AR, CO, ID, IL, MA, TX, WA
Responsibility	States
DD Agency or field staff	AR, AZ, CT, FL, ID, KY, LA, MA, MI, MO, NC, ND, NJ, NV, NY, OK, OR, PA, UT, WA, WY

Subcontractors	CO, HI, IA, IL, TX, VA
Other Agency than DD	DE, MN, MT, NM
Instruments Used	
AR – <i>Inventory for Client & Agency Planning (ICAP)</i> CO – <i>Long Term Care Assessment (LTC-100.2)</i> ID – <i>Scales of Independent Behavior-Revised (SIB-R)</i>	IL - <i>ICAP</i> MA – <i>MASSCAP</i> TX – <i>Standardized Assessment of Adaptive Behavior (MR/RC)</i> WA – <i>Support Intensity Scale (SIS), Support Assessment for Children (SAC)</i>

DISCUSSION

More than one-half of the states in the current study operate one or more Medicaid waiver programs for persons with developmental disabilities (the largest number reported was five in Nebraska), using the program’s flexibility to target home and community services to address local conditions and service needs. The upside of this phenomenon is the great amount of creative program development that has no doubt occurred in these additional waivers. The downside is the increased complexity for users and potential users of the services, as well as providers of services, in navigating the various waivers in systems that are already founded on complex bureaucratic structures and processes. State policy makers should consider monitoring the expanded use of waivers and the integration of existing waiver programs to ensure the most effective use of state resources given the needs and preferences of individuals receiving support.

Eligibility criteria are relatively consistent across the states’ waiver and ICF/MR programs, based on federal initial and annual level of care determination regulations. A majority of states have moved to level of care and waiver targeting criteria that are categorical (diagnosis-based) as well as functional (impaired adaptive functioning). Many states continue to directly reference the original Medicaid regulatory wording defining mental retardation and related conditions for purposes of the ICF/MR benefit. Although the federal definition of related condition includes disability related to cerebral palsy and epilepsy, it does not exclude any diagnosis or condition categorically, except for mental illness. Individuals with related conditions must meet the functional criteria set in federal regulation. Some states have targeted waiver eligibility to certain disability categories such as Asperger’s, Fetal Alcohol Syndrome, and other conditions. The expansion of services to individuals with autism is particularly notable. Six states (CO, IN, KS, MD, SC, and WI) currently operate Medicaid 1915(c) waivers for persons with autism who meet the Federal requirements (42 CFR 435.1010). Three states (PA, MA, and MT) are in the process of applying for waivers to serve this group of individuals, and at least three additional states (CT, MO and UT) are considering expanding waiver services to persons with autism. State policy makers should monitor state waiver eligibility and level of care standards to ensure individuals with diagnoses other than mental retardation meet the

federal regulatory criteria for a related condition. This is particularly important for states considering the expansion of waiver program services to additional groups.

Some states have adopted nationally recognized tools such as the Inventory for Client and Agency Planning to determine functional status for eligibility purposes. Others utilize state-specific instruments such as Massachusetts' Comprehensive Assessment Process (MASSCAP) or Arizona's PreAdmission Screening (PAS). The majority of states, however, rely on defined processes and an array of optional assessment tools to make the initial eligibility determination. The periodic re-evaluation of the individual service recipient through level of care determination processes appears to be performed by a majority of states during the annual service planning and review that all states carry out to ensure the individualization of supports and services for people using these services either in waivers or ICFs/MR. A third of the states report that they require the annual administration of a specific assessment tool for these redeterminations.

Interestingly, respondents reported that few state Medicaid agencies appear to use the detailed data gathered through the eligibility and level of care determination processes to track changes in the service population, such as monitoring beneficiary diagnoses or functional attributes, or documenting changes in service needs. The use of such information solely for assuring eligibility and level of care may reflect a lack of available personnel or expertise on the part of the state agency, but it does highlight an important missed opportunity. Additional investigation of mechanisms to explore the exchange and use of this information between state Medicaid agencies and their Developmental Disability Service counterparts would seem to be worth considering, particularly in light of the CMS requirement for states to develop and implement comprehensive quality management strategies for their waiver programs.

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Appendix

Exhibit 1: State Eligibility Criteria

States	Eligibility Criteria
Alabama	<p>Mental Retardation Definition: must have mental retardation diagnosis prior to age 18 and substantial functional limitations in 3 of 6 major life areas, as measured by the ICAP.</p> <p>Citation: AL Admin Code 580-5-31-14</p> <p>Contact : ICF/MR – NR Waiver – Fordyce Mitchell, 334.242.3719, FMitchell@mh.alabama.gov</p>
Alaska	<p>State DD Definition: must have a diagnosis present before age 22 of mental retardation, cerebral palsy, autism, PDD, FAS, TBI, or Prader-Willi, and substantial disability as reflected on the ICAP.</p> <p>Citation: 7AAC 43.1030 (b)(1)(B), 7 AAC 43.300</p> <p>Contact: ICF/MR – None Waiver - Rebecca Hilgendorf, 907-269-2083, Rebecca.Hilgendorf@alaska.gov</p>
Arizona	<p>State DD Definition: At risk up to age 6 of having DD, above age 6, must have a diagnosis of epilepsy, autism, cerebral palsy, or cognitive disability (MR) which occurred prior to age 18 and substantial functional limitations in 3 of 7 major life areas; must meet criterion on Preadmission Screening (PAS) tool.</p> <p>Citation: http://azsos.gov/public_services/Title_09/9-28.htm#Article_3</p> <p>Contact: ICF/MR – Brian Lensch, 602-542-6832, blensch@azdes.gov Waiver - Same</p>
Arkansas	<p>State DD Definition: must have a diagnosis present before age 22 of mental retardation, cerebral palsy, autism, or any other condition closely related to mental retardation, including dyslexia, and substantial handicap to persons ability to function without appropriate support services.</p> <p>Citation: AHS DAIL:Regs implementing the DD Act of 1996; http://medicaid.state.ar.us/InternetSolutionProvider/docs/ddswvr.aspx#manual</p> <p>Contact: ICF/MR – Debbie Dacus, 870.268.2246, Debbie.Dacus@arkansas.gov Waiver - Judy Routon, 870.268.2241, judy.routon@arkansas.gov</p>
California	<p>State DD Definition: must have a diagnosis present before age 18 of mental retardation, cerebral palsy, autism, or disabling conditions closely related to mental retardation, and constitutes a substantial disability for the person</p> <p>Citation: Welfare & Institutions Code, Section 4641, http://www.dds.ca.gov/Title17/T17SectionTOC.cfm?Subchapter1D=15</p> <p>Contact: ICF/MR – NR Waiver - Rita Walker, 916.654.1958, RWalker1@dds.ca.gov</p>

States	Eligibility Criteria
Colorado	<p>State DD Definition: must have a substantial disability before age 22 due to mental retardation, cerebral palsy, autism, epilepsy or other related neurological conditions that result in impairment of general intellectual or adaptive behavior (significant deficits in 2 or more areas) similar to a person with mental retardation as assessed on the Long Term Care Assessment (LTC-100.2).</p> <p>Citation: 2 CCR 503.1 16.120, http://stateboard.cdhs.state.co.us:8008/CDHS/rule http://www.chcpf.state.co.us/HCPF/msb/msbdeptprogramrules.asp</p> <p>Contact: ICF/MR – Matthew Solano, 303.866.7439, matthew.solano@state.co.us Waiver - Same</p>
Connecticut	<p>Mental Retardation/Related Conditions Definition: must have significantly sub average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period or a medical diagnosis of Prader-Willi.</p> <p>Citation: Conn. General Statute Sec. 17a-210</p> <p>Contact: ICF/MR – Deborah Duval, 860.418.6149, deborah.duval@ct.gov Waiver - Same</p>
Delaware	<p>State DD Definition: must have mental retardation, autism, Aspergers, Prader-Willi, or Brain Injury during the developmental period with concurrent adaptive limitations.</p> <p>Citation: Delaware Register of Regulations (3-1-08), http://regulations.delaware.gov/register/march2008/</p> <p>Contact: ICF/MR – Joseph Keyes, 302.744.9600, Joseph.Keyes@state.de.us Waiver - Valerie Smith, 302.744.9600, valerie.smith@state.de.us</p>
D.C.	<p>District DD Definition: must have diagnosis of mental retardation, cerebral palsy, epilepsy, Prader-Willi, Autism, or Spina Bifida and substantial deficits in 3 major life areas as measured by the LOC tool.</p> <p>Citation: D.C. Law 2-137</p> <p>Contact: ICF/MR – NR Waiver - Ken Slavin, 202.730.1585, kenneth.slavin@dc.gov</p>
Florida	<p>State DD Definition: must have diagnosis of mental retardation, cerebral palsy, epilepsy, Prader-Willi, autism, Spina Bifida, which manifested before age 18, with substantial limitations in 3 major life activities</p> <p>Citation: NR</p> <p>Contact: ICF/MR – Rene Johnson, 850.414.6923, rene-johnson@apd.state.fl.us Waiver - Same</p>

States	Eligibility Criteria
Georgia	<p>State DD Definition: must have diagnosis of mental retardation or closely related conditions such as cerebral palsy, epilepsy, autism, Prader-Willi, Autism Spectrum, Asperger's, PDD, Spina Bifida, FAS or Brain Injury (prior to age 22) which results in impairments in general intellectual functioning or adaptive behavior similar to those with mental retardation.</p> <p>Citation: NR</p> <p>Contact: ICF/MR – NR Waiver - C. Hammond, 404.657.2169, c Hammond@dhr.state.ga.us</p>
Hawaii	<p>Federal DD Definition: a severe chronic disability attributable to mental or physical impairments manifested before age 22, resulting in substantial functional limitations in 3 or more life activities</p> <p>Citation: HRS Chapter 11-88-3 @ https://capitol.hawaii.gov/sites/har/AdmRules1/11-88.pdf</p> <p>Contact: ICF/MR- Sherry Hester, 808.733.9172, sherry.hester@doh.hawaii.gov Waiver - Jean Luka, 808-587-6043, jean.luka@doh.hawaii.gov</p>
Idaho	<p>State DD Definition: chronic disability occurring before age 22, such as mental retardation, cerebral palsy, epilepsy, autism or other closely related condition or is attributable to dyslexia, and results in substantial functional limitation in 3 or more major life activities; must meet criterion on SIB-R.</p> <p>Citation: IDAPA 16.03.17</p> <p>Contact: ICF/MR – Paige Grooms, 208.947.3364, groomsp@dhw.idaho.gov Waiver - Same</p>
Illinois	<p>State DD Definition: a disability attributable to mental retardation or a related condition, such as cerebral palsy or epilepsy, and results in substantial limitations in 3 or more major life activities.</p> <p>Citation: Illinois Administrative Code, Title 89, Section 140.642</p> <p>Contact: ICF/MR: Connie Sims, 217.782.5883, connie.sims@illinois.gov Waiver: Same</p>
Indiana	<p>State DD Definition: a severe chronic disability attributable to mental or physical impairment, originating before age 22 that results in substantial limitations in 3 of 7 areas; must also meet criterion for mental retardation or related conditions.</p> <p>Citation: Indiana Code 12-7-2-61</p> <p>Contact: ICF/MR – NR Waiver - Linda Jump, 317.234.2764, Lynn.Jump@fssa.in.gov</p>

States	Eligibility Criteria
Iowa	<p>Mental Retardation/Related Conditions Definition: must have mental retardation and meet criterion on the MR Functional Assessment Tool</p> <p>Citation: http://dhs.state.ia/policyanalysis/PolicyManualPages/Manual_Documents/FORMS</p> <p>Contact: ICF/MR – Deborah Johnson, 515.725.1012, djohnso6@dhs.state.ia.us Waiver - Sue Stairs, 515.725.1146, sstairs@dhs.state.ia.us</p>
Kansas	<p>State DD Definition: mental retardation or severe, chronic disability attributable to mental or physical impairments, or a dual diagnosis of mental retardation and mental illness, manifested before age 22, results for those over 5 in substantial limitations in three or more life functioning areas; meets criterion on the Developmental Disabilities Profile</p> <p>Citation: KAR 39-1803</p> <p>Contact: ICF/MR – NR Waiver - Greg Wintle, 785.296.3561, greg.wintle@srs.ks.gov</p>
Kentucky	<p>State DD Definition: mental retardation or developmental disability manifested prior to age 22 that results in impairment of general intellectual functioning and adaptive behavior similar to that of a person with mental retardation and results from substantial cognitive deficits; must meet criterion on MAP351.</p> <p>Citation: http://www.lrc.ky.gov/Kar/9071001/145.htm</p> <p>Contact: ICF/MR – Betsy Dunnigan, 502.564.4527, betsy.dunnigan@ky.gov Waiver - Claudia Johnson, 502.564.7702, claudia.johnson@ky.gov</p>
Louisiana	<p>Federal DD Definition: individuals over age 18 with a severe chronic disability attributable to intellectual or physical impairments manifested before age 22 which results in substantial functional limitations in 3 or more areas of major life activity; or for children through age 9 a substantial developmental delay or condition which places the child at risk of developmental disability;</p> <p>Citation: DDLaw, La.Rev.Statutes28:451.1-455.2 , LARegisterVol.32,No.7, July20,2006</p> <p>Contact: ICF/MR – Greg Andrus, 225.342.0095, GAndrus@dhh.la.gov Waiver - Kathi Kliebert, 225.342.0095, kklieber@dhh.la.gov</p>
Maine	<p>Mental Retardation/Related Conditions: must have diagnosis of mental retardation or autism/autistic disorder; must show impairments in one domain of Activities of Daily Living; must meet criterion on BMS-99</p> <p>Citation: http://www.maine.gov/sos/cec/rules/10/144/ch101/c2s021.doc</p> <p>Contact: ICF/MR – NR Waiver - Earl Babcock, 207.287.7288, Earl.B.Babcock@Maine.gov</p>

States	Eligibility Criteria
Mass.	<p>Mental Retardation/Related Conditions: adults over age 18 must have mental retardation or, for children, 8 or under, must have autistic disorder, Retts, childhood disintegrative disorder, PDD, or Aspergers, with severe behavioral, communicative, or social deficits that interfere with the ability to remain in the home or the community; must meet criterion on the MASSCAP.</p> <p>Citation: http://www.mass.gov/dmr Regulations, Ch.6</p> <p>Contact: ICF/MR – Janet George, 617.624.7766, janet.george@state.ma.us Waiver - Same</p>
Michigan	<p>Federal DD Definition: a severe chronic disability attributable to a mental or physical impairment, manifested before age 22 and resulting in substantial functional limitations in 3 or more areas of major life activity;</p> <p>Citation: NR</p> <p>Contact: ICF/MR – Cynthia Kelly, 517.335.0263, Kellyc@michigan.gov Waiver- Debra Ziegler, 517.241.3044, zieglerd@michigan.gov Debbie Milhouse-Slaine, 517.241.5757, Milhouse@michigan.gov</p>
Minnesota	<p>Mental Retardation/Related Conditions: mental retardation and must meet criterion on DD Screening tool</p> <p>Citation: https://www.revisor.leg.state.mn.us/rules/?id=9525</p> <p>Contact: ICF/MR – Barb Nelson, 651.431.2434, Barbara.a.nelson@state.mn.us Waiver - Heidi Hamilton, 651.431.2443, heidi.hamilton@state.mn.us</p>
Mississippi	<p>State DD Definition: mental retardation, cerebral palsy, autism, Prader-Willi, PDD, Spina Bifida</p> <p>Citation: NR</p> <p>Contact: ICF/MR - NR Waiver - Ashley Lacoste, 601.359.1288, Ashley.lacoste@dmh.state.ms.us</p>
Missouri	<p>State DD Definition: mental retardation, cerebral palsy, epilepsy, Prader-Willi, Autism, Aspergers, PDD, Spina Bifida, or Brain injury before age 22; adults must meet criterion on the MOCABI.</p> <p>Citation: MO MRDD Comprehensive Waiver Renewal App.7-1-06 Appendix B; Community Support Renewal App. 7-1-06 Appendix B http://www.sos.mo.gov/adrules/csr/current/19csr/19c30-S1.pdf</p> <p>Contact: ICF/MR – Melissa Knipp, 573.751.8211, Melissa.knipp@dmh.mo.gov Waiver - Same</p>

States	Eligibility Criteria
Montana	<p>State DD Definition: must have a disability with origins before age 18 attributable to mental retardation, cerebral palsy, autism, or other neurologically disabling condition closely related to mental retardation, and results in substantial disability.</p> <p>Citation: Montana Administrative Rule for DD – about to be filed</p> <p>Contact: ICF/MR – Jeff Sturm, 406.444.2695, jesturm@mt.gov Waiver - Perry Jones, 406.444.5662, pjones@mt.gov</p>
Nebraska	<p>Mental Retardation/Related Conditions: mental retardation or related conditions attributable to mental or physical impairment manifested before age 22, resulting in substantial functional limitation in 3 or more areas of major life activity; must meet criterion on the SIB-R or Developmental Index.</p> <p>Citation: 480 NAC 2-006, 480 NAC 6-005 @ http://dhhs.ne.gov/reg/regs;</p> <p>Contact: ICF/MR – NR Waiver - Pam Hovis, 402.471.8717, pam.hovis@dhhs.ne.gov</p>
Nevada	<p>Mental Retardation/Related Conditions: mental retardation or severe chronic disability attributable to cerebral palsy, epilepsy, or related conditions related to mental retardation resulting in an impairment to general intellectual functioning or adaptive behavior similar to that of a person with mental retardation, with origins before age 22 and, resulting in substantial functional limitation in 3 or more areas of major life activity;</p> <p>Citation: www.nevadalegislature.com Rev. Statutes 433.174 & 433.184</p> <p>Contact: ICF/MR – Jane Gruner, SDSS, 775.688.1930,ext.2140, jgruner@src.state.nv Waiver - Rosemary Melarkey, 775.688.1988 ext.2260, rmelarkey@src.state.nv</p>
N. Hampshire	<p>State DD Definition: a disability which is attributable to mental retardation, cerebral palsy, epilepsy, autism, a specific learning disability or any other condition closely related to mental retardation, resulting in impairment in general intellectual functioning or adaptive behavior, which originated before age 22 and constitutes a severe disability to function normally in society;</p> <p>Citation: NH He-M 524</p> <p>Contact: ICF/MR – NR Waiver - Karen Kimball, 603.271.4272, KKIMBALL@DHHS.STATE.NH.US</p>
New Jersey	<p>Federal DD Definition: a severe, chronic disability attributable to mental or physical impairments, manifesting before age 22 and resulting in substantial functional limitations in 3 or more areas of major life activity; for those over age 12, must meet criterion on the Self Care Assessment Tool.</p> <p>Citation: NR</p> <p>Contact: ICF/MR – Ralph Lollar, 609.987.0814, Ralph.Lollar@dhs.state.nj.us Waiver - Same</p>

States	Eligibility Criteria
New Mexico	<p>State DD Definition: a severe chronic disability that is attributable to mental or physical impairments, including brain injury, mental retardation, cerebral palsy, autism, Aspergers, seizure disorder, chromosomal disorders, inborn errors of metabolism, and developmental disorders of brain formation, manifested before age 22 and results in substantial functional limitations in 3 areas of major life activity</p> <p>Citation: NR</p> <p>Contact: ICF/MR – Leslie Swisher, 505.841.5526, leslie.swisher@state.nm.us Waiver - Same</p>
New York	<p>State DD Definition: a disability that is attributable to mental retardation, cerebral palsy, epilepsy, autism, neurological impairment or any other condition closely related to mental retardation, resulting in impairment of general intellectual functioning or adaptive behavior and manifesting before age 22, and constitutes a substantial handicap to the persons ability to function normally in society; dyslexia may be included if resultant of one of the other related conditions.</p> <p>Citation: MHL 1.03 (22); OMRDD Eligibility Determination Policy Advisory</p> <p>Contact: ICF/MR – Same Waiver - Kevin O’Dell, 518.474.5647, kevin.odell@omr.state.ny.us</p>
No. Carolina	<p>Federal DD Definition: a severe chronic disability attributable to a mental or physical impairment, manifested before age 22 (excluding traumatic head injury which may be manifested after age 22) and resulting in substantial functional limitations in 3 or more areas of major life activity; includes children up to age 4 diagnosed with developmental delay</p> <p>Citation: http://www.ncdhhs.gov/mddsas/cap-mrdd/capmanual/1-18-06.pdf</p> <p>Contact: ICF/MR – Vivian Leon, 919.855.4700, vivian.leon@ncmail.net Waiver- Rose Burnette, 252.355.9032, rose.burnette@ncmail.net</p>
No. Dakota	<p>Federal DD Definition: a severe chronic disability attributable to mental or physical impairment, which manifests before age 22 and results in substantial functional limitations in 3 or more areas of major life activity; must meet criterion on the Progress Assessment Review (PAR)</p> <p>Citation: NDDC 75-04-06</p> <p>Contact: ICF/MR – Michael Marum, 701.328.8977, mmarum@nd.gov Waiver - Same</p>
Ohio	<p>Federal DD Definition: a severe chronic disability attributable to mental or physical impairment, which manifests before age 22 and results for those over 6 in substantial functional limitations in 3 or more areas of major life activity, for those under 3 one developmental delay, and for those ages 3-6 two developmental delays; must meet criterion on the Ohio Eligibility Determination Instrument (OEDI).</p> <p>Citation: OAC 5123:2-1-02</p> <p>Contact: ICF/MR – NR Waiver- Jane Black, 614-387-0578, jane.black@dmr.state.oh.us</p>

States	Eligibility Criteria
Oklahoma	<p>Mental Retardation/Related Conditions: mental retardation. Citation: OAC 317:35-5-4 Contact: ICF/MR – Mia Sith, 405.521.4976, Mia.Smith@okdhs.org Waiver - Linda Moffatt, 405.522.7338, Linda.moffatt@okhca.org</p>
Oregon	<p>State DD Definition: a disability that impacts in childhood and impacts adaptive behavior, includes mental retardation, autism, cerebral palsy, epilepsy or other neurologically disabling condition that results in significant impairment in adaptive behavior and manifests before age 22 (age 18 for mental retardation). Citation: http://www.dhs.state.or.us/policy/spd/rules/411_321.pdf Contact: ICF/MR – Mike Maley, 503.947.4228, mike.j.maley@state.or.us Waiver - Debra Burke, 971.673.2976, debra.l.burke@state.or.us</p>
Pennsylvania	<p>Mental Retardation/Related Conditions: mental retardation Citation: 55Pa.Code Chapter 6210: Bulletin 00-08-04 Contact: ICF/MR – Kelly Svalbonas, 717.783.1003, ksvalbonas@state.pa.us Waiver - Cathi Berkey, 717.346.1119, cberkey@state.pa.us</p>
So. Dakota	<p>Federal DD Definition: a severe, chronic disability that is attributable to mental or physical impairments, manifested before age 22 and results in substantial functional limitations in three or more areas of major life activity; must meet criterion on the ICAP Citation: ARSD 46:10:05:05 Contact: ICF/MR – NR Waiver - Lori Martinec, 605.773.3438, lori.martinec@state.sd.us</p>
Tennessee	<p>Mental Retardation/Related Conditions: mental retardation or before age 5 substantial delays with high probability of resulting in mental retardation. Citation: F&A Rules, Ch 1200-13-1-.25 Contact: ICF/MR – NR Waiver - Debbie Coleman, 615-6266, debbie.coleman@state.tn.us</p>
Texas	<p>Mental Retardation/Related Conditions: mental retardation or related conditions; must meet criterion on the ICAP and RCESI (Related Conditions Eligibility and Screening Instrument). Citation: http://info.sos.state.tx.us/pls/pub/readtac\$ext.TACPage Contact: ICF/MR – K. McCormick, 515.438.4385, Katherine.McCormick@dads.state.tx.us Waiver - Patrick Koch, 512.438.4553, patrick.koch@dads.state.tx.us</p>
Utah	<p>Mental Retardation/Related Conditions: mental retardation or related conditions Citation: UAC R414-502;Law:26-1-5; 26-18-3; 63-46a-7(1)(a) Contact: ICF/MR – Colleen Garrett, 801.763.4036, CGarrett@utah.gov Waiver - Chuck Bruder, 801.538.4202, cbruder@utah.gov</p>

States	Eligibility Criteria
Vermont	<p>Mental Retardation/Related Conditions: mental retardation or related conditions; must meet criterion on Needs Assessment/Periodic Review</p> <p>Citation: AHS DAIL, Regs. implementing DD Act of 1996</p> <p>Contact: ICF/MR – Janine Parker, 802.786.5081, janine.parker@ahs.state.vt.us Waiver - Same</p>
Virginia	<p>Mental Retardation/Related Conditions: mental retardation or related conditions; under age 6 may be at “developmental risk;” must meet criterion on Level of Functioning assessment.</p> <p>Citation: 12 VAC30-120-720; 12 VAC30-120-215.B.2.c NOTE: VA’s IFDD waiver excludes MR</p> <p>Contact: ICF/MR- Dawn Traver, 757.253.4316, dawn.traver@co.dmhmrzas.virginia.gov Waiver - Same</p>
Washington	<p>State DD Definition: a disability attributable to mental retardation, cerebral palsy, epilepsy, autism or other neurological condition related to mental retardation, manifested before age 18 and resulting in substantial limitations to the individual’s adaptive functioning; must meet criterion on Supports Intensity Scale over age 16 and over, for under 16, the Support Assessment for Children is used.</p> <p>Citation: http://apps.leg.wa.gov/WAC/default.aspx?cite=-388-823-0040</p> <p>Contact: ICF/MR – NR Waiver - Linda Rolfe, 360.725.3461, RolfeLA@dshs.wa.gov</p>
West Virginia	<p>State DD Definition: any condition closely related to mental retardation which results in impairment to general intellectual functioning or adaptive behavior similar to persons with mental retardation, resulting in substantial deficits in 3 or more major life areas, and manifested prior to age 22; includes autism, TBI, Spina Bifida, and Tuberos Sclerosis.</p> <p>Citation: NR</p> <p>Contact: ICF/MR – NR Waiver - Jon Sassi, 304.558.3813, jonsassi@wvdhhr.org</p>
Wyoming	<p>Mental Retardation/Related Conditions: mental retardation or related conditions with functional limitations; must meet criterion on ICAP for deficits in 3 major areas.</p> <p>Citation: http://soswy.state.wy.us/RuleChapter41</p> <p>Contact: ICF/MR – Cliff Mikesell, 307.777.7115, cliff.mikesell@health.wyo.gov Waiver - Same</p>

Note

DD – Developmental Disability

ICAP – Inventory for Client and Agency Planning

ICF/MR - Intermediate Care Facility for People with Mental Retardation

FAS – Fetal Alcohol Syndrome

MR - Mental Retardation: sub average intellectual functioning (usually 70 or below as measured by a standardized individualized psychological evaluation) that was evidenced prior to age 18 and substantial functional limitations.

NR- No Response

PDD – Pervasive Developmental Disorder

TBI – Traumatic Brain Injury

Exhibit 2: Waivers Reported by Responding States

State	Waiver Title/s Reported in the Surveys	Type
Alabama	Alabama Waiver for Persons with Mental Retardation	1915c
	Alabama Living at Home Waiver	1915c
Alaska	People with Mental Retardation and Developmental Disabilities	1915c
Arizona	Arizona Long Term Care Services	1115
Arkansas	Arkansas Home and Community Based Services Waiver	1915c
California	Home and Community Based Services Waiver for the Developmentally Disabled	1915c
Colorado	Home and Community Based Services Waiver for the Developmentally Disabled	1915c
	Adult Supported Living Services Waiver	1915c
Connecticut	Individual and Family Support Waiver	1915c
	Comprehensive Waiver	1915c
Delaware	HCBS (9.90.R4)	1915c
D.C.	HCBS (307.90.R1)	1915c
Florida	Florida Developmental Disabilities Home and Community Based Services (includes those under Florida Consumer Directed Care Plus, 1115)	1915c
	Florida Family and Supported Living Waiver	1915c
	Florida Consumer Directed Care Plus	1115
Georgia	Community Habilitation Support Services	1915c
	Mental Retardation Waiver Program	1915c

State	Waiver Title/s Reported in the Surveys	Type
Hawaii	HCBS Medicaid Waiver for Individuals with Developmental Disabilities	1915c
Idaho	Developmental Disabilities Waiver	1915c
	Idaho State School and Hospital Waiver	1915c
Illinois	Waiver for Adults with DD	1915c
	Residential Waiver for Children and Young Adults with DD	1915c
Indiana	Autism Waiver	1915c
	Waiver for Persons with Developmental Disabilities	1915c
	Support Services Waiver	1915c
Iowa	HCBS Mental Retardation Waiver	1915c
Kansas	Kansas Home and Community Based Services Waiver for Persons with Mental Retardation and/or Developmental Disabilities	1915c
Kentucky	Supports for Community Living	1915c
Louisiana	Supports Waiver	1915c
	Children's Choice Waiver	1915c
	New Opportunities Waiver	1915c
Maine	Home and Community Based Benefits for Adults with Mental Retardation of Autistic Disorder	1915c
	Support Waiver	1915c
Massachusetts	Mental Retardation-Adult Waiver	1915c
	Children's Autism Spectrum Disorder Waiver	1915c
Michigan	Habilitation Supports Waiver (automatically included in managed care health plan)	1915b/c

State	Waiver Title/s Reported in the Surveys	Type
	Children's Waiver Program	1915c
Minnesota	Developmental Disabilities Waiver	1915c
Mississippi	Mental Retardation/Developmental Disabilities Waiver	1915c
Missouri	Missouri MRDD Comprehensive Waiver	1915c
	Missouri MRDD Community Support Waiver	1915c
	Missouri Children with DD Waiver	1915c
Montana	Comprehensive Services Waiver	1915c
	Community Supports Waiver	1915c
Nebraska	Comprehensive HCBS Waiver for Adults with Developmental Disabilities	1915c
	Residential HCBS Waiver for Adults with Developmental Disabilities	1915c
	Day Services HCBS Waiver for Adults with Developmental Disabilities	1915c
	Community Supports HCBS Waiver for Adults with Developmental Disabilities	1915c
	HCBS Waiver for Children with Developmental Disabilities and Their Families	1915c
Nevada	Nevada Waiver for Persons with Mental Retardation and Related Conditions	1915c
New Hampshire	Individuals with Developmental Disabilities	1915c
	Home and Community Based Services Waiver	1915c
	In Home Support for Children with Severe Disabilities	1915c
New Jersey	Community Care Waiver	1915c
New Mexico	Developmental Disabilities Waiver Program	1915c
New York	Care at Home III, IV, VI	1915c

State	Waiver Title/s Reported in the Surveys	Type
	Home and Community Based Services Waiver	1915c
North Carolina	CAP MR-DD	1915c
North Dakota	Self-Directed Supports for Families	1915c
	Self-Directed Supports for Adults	1915c
	HCBS for Individuals with MRDD	1915c
Ohio	Individual Options	1915c
	Level One	1915c
Oklahoma	In-Home Supports Waiver for Children	1915c
	In-Home Supports Waiver for Adults	1915c
	Homeward Bound Waiver	1915c
	Community Waiver	1915c
Oregon	Comprehensive Services Waiver	1915c
	Support Services Waiver	1915c
	ICF/MR Model Waiver	1915c
	Hospital Model Waiver	1915c
Pennsylvania	Consolidated Waiver	1915c
	Medicaid Waiver for Infants, Toddlers, and Families	1915c
	Person/Family Directed Support Waiver	1915c
South Dakota	South Dakota Family Support Waiver	1915c
Tennessee	Home and Community Based Services Waiver for Persons with MRDD	1915c
	Home and Community Based Services Waiver for Persons with Mental Retardation	1915c
	Self-Determination Waiver Program	1915c
Texas	Deaf Blind with Multiple Disabilities	1915c

State	Waiver Title/s Reported in the Surveys	Type
	Home and Community-based Services (HCS) Program	1915c
	Texas Home Living Program	1915c
	HCBS (0221)	1915c
	Consolidated Waiver Program	1915c
Utah	Utah Community Supports Waiver for Individuals with Intellectual Disabilities and Related Conditions	1915c
Vermont	Global Commitment	1115
Virginia	MR Waiver	1915c
	Day Support Waiver	1915c
	Individual and Family Developmental Disabilities Waiver	1915c
Washington	Basic Waiver	1915c
	Basic Waiver Plus	1915c
	Core Waiver	1915c
	Community Protection Waiver	1915c
West Virginia	MR/DD Waiver	1915c
Wyoming	Adult Acquired Brain Injury Waiver	1915c
	Adult Developmental Disability Home and Community Based Waiver	1915c