

West Virginia
Intellectual/Developmental Disabilities
Waiver Program



**MEMBER & FAMILY
HANDBOOK**

MEMBER & FAMILY HANDBOOK
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INTRODUCTION

Welcome to the Intellectual and Developmental Disabilities Waiver Program (formerly the MR/DD Waiver Program). The I/DD Waiver Program is intended to provide services to support and assist you in becoming as independent as possible. These services are provided in natural settings, such as your home and community.



The WV I/DD Waiver Program is a Federally Approved Program for individuals with Intellectual and Developmental Disabilities. The Program is operated in WV by the Bureau for Medical Services (BMS), who contracts APS Healthcare, Inc—WV as the Administrative Services Organization (ASO). In addition to the ASO, BMS also contracts with a Medical Eligibility Contracted Agency (MECA) that determines member eligibility.

Rights & Responsibilities

YOUR RIGHTS

As a member of the WV I/DD Waiver Program, your rights include:

- Choosing between the I/DD Waiver Program or Institutional Care;
 - Institutional Care, in WV, is defined as a group home called an Intermediate Care Facility for persons with Intellectual Disabilities (ICF/ID).
- Choosing a Service Delivery Model
 - Traditional Services
 - Traditional Services and Agency with Choice
 - Traditional Services and Personal Options;
- Choosing one or more I/DD Waiver provider agency to meet your needs;
- Transferring your services to a different I/DD Waiver provider agency at any time;
- Accessing your agency's grievance process if you are dissatisfied with your services;
- Accessing the Medicaid Fair Hearing Process for issues that are consistent with state and federal law.

YOUR RESPONSIBILITIES

You will also have responsibilities as a member of the WV I/DD Waiver Program, which you can meet with the assistance of your legal representative (if applicable), family, or other supports. These responsibilities include:

- Attending Interdisciplinary Team (IDT) meetings at required times;
- Participating in Annual Assessments;
- Following all program policies, such as monthly home-visits with your provider agency;
- Maintaining a safe work environment for your staff.

ASO Responsibilities

As the Administrative Services Organization (ASO), APS Healthcare is responsible for assessing your needs and determining your annual budget used to purchase your I/DD Waiver services. APS Healthcare also provides education to you, your family and other supports, and I/DD Waiver provider agencies.

MECA Responsibilities

The Medical Eligibility Contracted Agency (MECA) is an organization that determines I/DD Waiver Program eligibility for applicants and existing members (redetermination).

Provider Responsibilities

Agencies approved to provide I/DD Waiver Program services train, support, and assist you to become as independent as possible. Provider agency responsibilities include:

- Ensuring you are not discriminated against or treated unfairly if you make a formal complaint or have been involved in an investigation process;
- Ensuring that you are only discharged from their services when a plan is in place to transfer all your services to another provider agency;
- Providing you with the maximum choice of services within your annual budget;
- Ensuring that your services are delivered properly and that all documentation meets requirements;
- Ensuring all agency staff who provide direct care services to you are properly and fully trained;
- Ensuring that properly and fully trained staff are available to provide your services;
- Reporting any incidents that cause you injury.

PROGRAM ELIGIBILITY

To meet medical eligibility for the WV I/DD Waiver Program, you must have an Intellectual/Developmental Disability or related condition diagnosed before age 22, and require the level of care and services offered in institutional settings. In addition, you must be a resident of West Virginia, choose Home and Community Based Services instead of institutional care, and meet Financial Eligibility. Your financial eligibility will be re-determined at least annually or more often if you have a change in income.



Your medical eligibility for the Program will be re-determined each year through a Functional Assessment conducted by APS Healthcare. If you are found no longer medically eligible as a result of your Annual Assessment and are terminated from the Program, you have the right to appeal this decision through the Medicaid Fair Hearing Process.

PERSON-CENTERED PROGRAM

The WV I/DD Waiver Program is Person-Centered, which means that the focus of your services is.....

YOU! Your input is very valuable and you will be an important part of your team. Every person on the Program is unique, so delivery of your services will be tailored to meet your needs!



ANNUAL FUNCTIONAL ASSESSMENT & ANNUAL INDIVIDUALIZED BUDGET

Each year, you will be required to participate in an Annual Functional Assessment with APS Healthcare. This assessment usually takes about two hours. An APS Healthcare employee, known as a Service Support Facilitator or SSF, will gather information from you, your support persons, and your Service Coordinator about the supports you need. This information will be used by the MECA to determine whether you continue to be eligible for the Program and by APS Healthcare to determine your Annual Individualized Budget.



Your Annual Individualized Budget is the dollar amount that you will be allowed to spend on WV I/DD Waiver Services during your service year, which will start on a date that is assigned to you.



Budget

FREEDOM OF CHOICE

All members of the WV I/DD Waiver Program complete a Freedom of Choice Form at least once per year with the assistance of an APS Healthcare Service Support Facilitator or your Service Coordinator. On the form, you will decide:

- Whether you wish to receive support through the WV I/DD Waiver Program or an ICF/MR (Institutional) setting;
- Your Service Coordination Provider Agency among those licensed to serve your county;
- Which Service Delivery Model or Models you would like to use.



If you change your mind during the year, you can complete a new form at any time. To access this form go to:

<http://www.dhhr.wv.gov/bms/hcbs/IDD/Documents/App2.pdf>



AVAILABLE SERVICES

The following services are available to all WV I/DD Waiver Program Members through the Traditional, Traditional and Agency with Choice, and the Traditional and Personal Options Service Delivery Models:

Your Services

- **Service Coordination:** All members of the Program, regardless of Service Delivery Model, will be assigned a Service Coordinator who works for your chosen provider agency. Your Service Coordinator will ensure that program requirements are met, will schedule and facilitate your IDT meetings, schedule and attend your Annual Functional Assessment, and conduct your monthly home visit;
- **Person-Centered Supports (PCS):** Person-Centered Support staff will assist you in becoming as independent as possible, while ensuring that your needs are met in a variety of settings;
- **Respite:** Respite is designed to give your primary caregiver a break. Your trained respite provider(s) will spend time with you while your primary caregiver enjoys some much deserved time off;
- **Transportation:** If you are traveling to certain activities, including doctor and therapy appointments and training activities identified by your team, your support providers may be reimbursed for their mileage;

- Facility-Based Day Habilitation: If you are an adult, you may elect to attend a Day Habilitation Program operated by a provider agency. These facilities employ agency staff who work with you to continue to acquire basic living skills;
- Supported Employment Services: If you would like to explore becoming part of the work force, you can do so through the WV I/DD Waiver Program, working with a job coach if you choose;
- Physical, Occupational, and Speech Therapies: If your doctor recommends these services, they may be available to you;
- Environmental Accessibility Adaptations: Members can use up to \$1000 of their Annual Individualized Budget per service year to make modifications to their home or vehicle to increase their independence and accessibility.
- Electronic Monitoring: If members choose and are approved by their IDT, they may use off-site electronic monitoring instead of staff in their home. This offers members more independence while ensuring that they are safe in their home.

The following service is available to WV I/DD Waiver Program Members through the Traditional and Agency with Choice Service Delivery Model and the Traditional and Personal Options Service Delivery Models **only**:

- Participant-Directed Goods & Services*:
THIS SERVICE IS ONLY AVAILABLE UNDER THE PARTICIPANT-DIRECTED SERVICE DELIVERY MODELS. Members who choose to participant-direct at least one other service can use up to \$1000 of their Annual Individualized Budget per service year to purchase items identified as needed by the IDT and not otherwise covered under the Waiver Program or Medicaid State Plan.

For full details on any of the above services, or for information on services not listed above, please review your WV I/DD Waiver Manual or ask your Service Coordinator. To access the WV I/DD Waiver Manual go to:

<http://www.dhhr.wv.gov/bms/hcbs/IDD/Documents/App2.pdf>

SERVICE DELIVERY MODELS

YOUR CHOICE

As a member of the WV I/DD Waiver Program, you will have the option to choose among three Service Delivery Models. You may choose all your services through the Traditional Service Delivery Model or you may choose a combination of Traditional Services and Participant-Directed Services (ie—the Traditional and Agency with Choice Model or the Traditional and Personal Options Model). These Service Delivery Models are:

- Traditional Service Delivery Model
- Participant-Directed Service Delivery Models:
 - Traditional Services and Agency with Choice
 - Traditional Services and Personal Options



I Choose

Regardless of the Service Delivery Model or Models

you choose, you will be able to select among a variety of services to meet your support needs.

TRADITIONAL SERVICE DELIVERY MODEL

Traditional

All members of the Program will receive some form of Traditional Services. All of the services described above, with the exception of Participant-Directed Goods & Services, are available under the Traditional Service Delivery Model.

If you choose to receive all of your services via the Traditional Service Delivery Model, your selected provider agency will be responsible for recruiting, hiring, training, and supervising your Person-Centered Support and/or Respite staff, as your provider agency will be the employer of record. In addition, your provider agency will set your staff's schedule and hourly rate of pay.

With the Traditional Service Delivery Model, your selected provider agency will also be responsible for preparing payroll documents and required financial reports for state/local government, and verifying that employees meet qualifications.

In addition, your provider agency will monitor your Annual Individualized Budget. With this service delivery model you will be limited to the caps on direct support hours as indicated in the WV I/DD Waiver manual. There is no monthly administrative fee or overhead charge for this service delivery model.

Traditional Service Delivery Model: Who's Responsible?	
Recruiting PCS and/or Respite Staff	Provider Agency
Hiring PCS and/or Respite Staff	Provider Agency
Training PCS and/or Respite Staff	Provider Agency
Supervising PCS and/or Respite Staff	Provider Agency
Setting Staff Schedule	Provider Agency
Setting Staff Hourly Rate of Pay	Provider Agency
Preparing Payroll & Other Required Financial Reports	Provider Agency
Verifying that Employees Meet Required Qualifications	Provider Agency
Monitoring Your Annual Budget	Provider Agency





Agency

PARTICIPANT-DIRECTED OPTION: TRADITIONAL SERVICES and AGENCY with CHOICE

Agency with choice

If you choose the Traditional Services and Agency with Choice Service Delivery Model, you can access all services available through the Traditional Model as well as participant-direct your Person-Centered Support Services, Respite Services, Transportation Services, and/or Participant-Directed Goods & Services*.

Traditional Services and Agency with Choice allows you to recruit, train, and supervise your Person-Centered Support and Respite staff, though your provider agency will be the employer of record. In addition, you will set your staff's work schedule, but your provider agency is responsible for hiring and setting the hourly rate of pay.

With the Traditional and Agency with Choice Service Delivery Model, your selected provider agency will be responsible for preparing payroll documents and required financial reports for

state/local government, and verifying that employees meet qualifications.

Your provider agency will also monitor your Annual Individualized Budget. You will not be limited to the caps on direct support hours as indicated in the WV I/DD Waiver manual. If you choose this service delivery model, you will be charged a \$45 monthly administrative fee, which is paid from your annual budget.

Traditional Services with Agency with Choice: Who's Responsible?	
Recruiting PCS and/or Respite Staff	You/Your Representative
Hiring PCS and/or Respite Staff	Provider Agency
Training PCS and/or Respite Staff	You/Your Representative
Supervising PCS and/or Respite Staff	You/Your Representative
Setting Staff Schedule	You/Your Representative
Setting Staff Hourly Rate of Pay	Provider Agency
Preparing Payroll & Other Required Financial Reports	Provider Agency
Verifying that Employees Meet Required Qualifications	Provider Agency
Monitoring Your Annual Budget	Provider Agency



PARTICIPANT –DIRECTED OPTION: TRADITIONAL SERVICES WITH PERSONAL OPTIONS



If you choose the Traditional Services and Personal Options Service Delivery Model, you can also access the services available through the Traditional Model as well as participant-direct your Person-Centered Support Services, Respite Services, Transportation Services, and/or Participant-Directed Goods & Services*.

With Traditional Services and Personal Options, you will be the employer of record. You may appoint someone to be your representative to help you with your responsibilities. You (and your representative if you have appointed one) will be responsible for recruiting, hiring, training, and supervising your Person-Centered Support and Respite staff. In addition, you will set your staff's work schedule and their hourly rate of pay.

If you choose this model, you will be supported by Public Partnerships, LLC, the contracted Fiscal/Employer Agent. PPL will be responsible for preparing payroll documents and required financial reports for state/local government, and verifying that employees meet qualifications.

You will monitor your Annual Individualized Waiver Budget, and will not be limited to the caps on direct support hours as indicated in the WV I/DD Waiver manual. Instead, you will be limited by the amount of money in the part of your budget you have designated for Participant-Directed Services. If you choose this service delivery model, a \$320 monthly fee will be assessed; however this will be paid with administrative funds and will therefore not be paid from your annual budget.

*In order to receive Participant-Directed Goods & Services, you must choose to participant direct at least one of the following services: Person-Centered Support, Respite, or Transportation.

Traditional Services and Personal Options: Who's Responsible?	
Recruiting PCS and/or Respite Staff	You/Your Representative
Hiring PCS and/or Respite Staff	You/Your Representative
Training PCS and/or Respite Staff	You/Your Representative
Supervising PCS and/or Respite Staff	You/Your Representative
Setting Staff Schedule	You/Your Representative
Setting Staff Hourly Rate of Pay	You/Your Representative
Preparing Payroll & Other Required Financial Reports	F/EA PPL
Verifying that Employees Meet Required Qualifications	F/EA PPL
Monitoring Your Annual Budget	You/Your Representative

MEMBER GRIEVANCES/COMPLAINTS

You have the right to receive verbal or written information on your provider agency's rights and grievance policies. If you are dissatisfied with your services, you have the right to access their grievance process. If this process does not resolve your issues, you may file a formal complaint with APS Healthcare.

MEMBER DISCHARGE

You may be discharged from the WV I/DD Waiver Program if you:

- No longer meet medical eligibility requirements;
- No longer meet financial eligibility requirements;
- Fail to comply with certain I/DD Waiver Program requirements including:
 - participating in monthly home-visits with your provider agency Service Coordinator;
 - participating in your required assessments;
 - participating in IDT meetings;
- Do not receive direct-care services (ie— Person-Centered Supports, Respite, Facility-based Day Habilitation and/or Supported Employment) for 180 consecutive days.

QUALITY IMPROVEMENT ADVISORY COUNCIL

The QIA Council is made up of former and current I/DD Waiver members, family members, stakeholders, and providers. The council can recommend policy changes, recommend program priorities and quality improvement ideas, monitor and evaluate policy changes, monitor and evaluate implementation of those priorities and improvement ideas, serve as a link between I/DD Waiver and interested individuals, and establish committees and work groups. To learn more about the QIA Council's meeting dates, etc., please contact APS Healthcare.

Each QIA Council meeting is open for public comment. For more up-to-date information regarding Council meeting dates and locations, as well as specific information on public comment periods, please go to: <http://www.dhhr.wv.gov/bms/hcbs/IDD/Pages/QIA.aspx>.

If you are interested in becoming a member of the QIA Council, contact APS Healthcare at 1.866.385.8920 for more information.



APS HEALTHCARE TEAM

- **Service Support Facilitator:** Conducts Annual Functional Assessments and provides education to members & supports during assessments;
- **Registration Coordinator:** Determines which services to authorize based on assessed needs and your Annual Individualized Budget and registers purchased services;
- **Provider Educator:** Trains, educates, and reviews your provider agency;
- **Consumer & Family Liaison:** Teaches you & your supports about the WV I/DD Waiver Program and helps you & your supports locate available resources.



To access the current I/DD Waiver Manual, go to:
<http://www.dhhr.wv.gov/bms/hcbs/IDD/Pages/IDDW%20Manual%20Info.aspx>

IMPORTANT CONTACTS:

Bureau for Medical Services (BMS)

Phone: 304.356.4904

Fax: 304.558.4398

Website:

www.dhhr.wv.gov/bms/hcbs/IDD/Pages/default.aspx

APS Healthcare

100 Capitol St Suite 600

Charleston, WV 25301

Phone: 304.380.0617

Toll-Free: 1.866.385.8920

Website: www.apshealthcare.com/wv

Public Partnerships, LLC (PPL)—Fiscal/Employer

Agent (F/EA)—Personal Options

Toll-Free: 1.877.908.1757

Fax: 304.296.1932

Molina Medicaid Solutions—Claims Processing

Toll-Free (for providers): 1.888.483.0793

Phone (for members): 304.343.3380

Toll Free Help-Desk: 1.877.902.1206

Fax: 304.348.3380

WV Protective Services

Toll-Free: 1.800.352.6513

Office of Health Facility Licensure & Certification
(OHFLAC)

Phone: 304.558.0050