

I/DD Supports for Children in Oregon



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We're going to talk about...

- Why we care about Medicaid
- Programs and services
- Who is eligible
- Steps to get services
- Questions and Answers



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DD System Values (ORS 427.007)

1. Everyone benefits when people with I/DD and their families:
 - Exercise choice and self-determination
 - Live and work in the most integrated settings
 - Play a major role in planning community supports
2. Employment is preferred over unemployment, segregated employment, day programs.
3. Families get the support they need:
 - To keep their children at home; or
 - In a home like setting with close ties to their family.

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Basic DD Services Eligibility

1. Person has intellectual or developmental disability; and
2. This causes impairments in adaptive behaviors (everyday living skills like walking and communicating); and
3. The impairments are not caused by mental disorder, sensory impairment, personality disorder, substance abuse, learning disability, or ADHD.

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Medicaid Brief Overview

- Health program for low income individuals and families - includes those with disabilities
 - Jointly funded with federal and state dollars;
 - The Centers for Medicare and Medicaid Services (CMS) make the rules at the federal level; and
 - Oregon administers its Medicaid program with approval from CMS.
- Medicaid serves people two ways:
 - State plans; and
 - Waivers.

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What is a Medicaid State Plan?

- Contract between a state and CMS.
- Explains how the state administers the program covered by the state plan:
 - Who is covered,
 - Services that are covered,
 - Provider reimbursement; and
 - Quality assurance requirements

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Medicaid State Plans are Entitlements

- No waiting lists to access a state plan
- Timely services:
 - If a person is eligible, and
 - Needs a state plan service as determined by an assessment or doctor,
 - Then, they must get it in a timely manner.
- State cannot deny state plan services for “lack of resources”

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Oregon Has Two State Plans Serving People with I/DD

- The Oregon Health Plan:
 - Basic health insurance coverage (doctor, hospital, prescriptions)
 - Individuals and families: income up to 138% FPL
- The Community First Choice (K PLAN)
 - Personal care in home and community settings
 - Level of Care: without these services, would require care in hospital, nursing facility or institution.
 - Family income up to 138% FPL or on a waiver

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What is a Medicaid “Home and Community Based” Waiver?

- Allows states to provide long term services in a “home and community based” setting
 - Instead of in an institution like a nursing home, state psychiatric hospital, or an institution for people with I/DD (called ICF/IDD)
 - Oregon uses five waivers to deliver services to people with I/DD in the community.

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What else do I need to know about waivers?

- Waivers can:
 - Have wait lists.
 - Can be limited to certain populations, like kids with I/DD.
 - Have different income rules than the state plan.
 - Oregon’s I/DD waivers allow income up to 300% SSI.
 - Look at only the child’s income rather than the family’s income for eligibility purposes.

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What waivers does Oregon use in the I/DD System?

- Adult Support Services waiver:
 - Adults living in family or own home
- Kids and adult Comprehensive Services waiver:
 - People living in group, foster, family or own home
- Kids waivers (children’s intensive in-home services):
 - Medically Fragile (hospital level of care)*
 - Medically Involved (nursing home level of care)*
 - Behavior (ICF/IDD level of care)

* I/DD Eligibility not needed for Medically Fragile and Medically Involved

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Kids Waiver Services Summary

- Case Management
- Family Training
- Environmental Safety Supports
- Vehicle Modifications
- Special Diets

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Adult Waiver Services Summary

- Supported Employment
- Prevocational Services
- Case Management
- Family Training
- Vehicle Modifications
- Special Diets

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K Plan Services (Kids and Adults)

- ADL/IADL Support
- Behavior Consultation
- Home Modifications
- Relief (Respite) Care
- Skills Training
- Foster Care
- Group Homes
- Assistive Technology
- Chore Services (parental responsibility for kids, exceptions exist)
- Non-Medical Transportation (parental responsibility for kids, exceptions exist)
- Community Inclusion/Day Supports (adults)

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What Services Are in the K Plan?

- Activities of Daily Living (ADL):
 - Bathing, dressing, eating, ambulation, transferring, bowel and bladder care, stand-by support, cognition/memory care and behavior supports
- Instrumental Activities of Daily Living (IADL):
 - Light housekeeping, laundry, meal prep, non-medical transportation, shopping, chore services (can include heavy cleaning).

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What Else Is In The K Plan?

- Relief (respite) care
- Skill development:
 - Getting, maintaining, or enhancing skills for ADL, IADL and health related tasks
- Assistive Technology (< \$5,000/yr):
 - Emergency response systems
 - Equipment to support the person’s independence. Cannot be also covered by the Oregon Health plan.

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Anything Else Covered in K Plan?

- Voluntary training on how to manage your own attendant services
- Home modifications to increase independence or accessibility (<\$5,000/yr)
- Behavior Support
- Community Transportation (for kids, parental responsibility, but exceptions exist)
- Community Inclusion/Day Support (adults)

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Steps for Kids to Obtain K Plan Services

- I/DD Eligibility (entry to the I/DD System):
 - Intellectual or developmental disability that causes impairments in adaptive behaviors.
- K Plan Eligibility (entry to in-home supports):
 - Medicaid eligibility through income or waiver; and
 - Level of care: without services, the child would need services in a hospital, nursing facility or institution.
- Needs Assessment: identify ADL/IADL needs
- Individual Service Plan: identifies other needs and builds plan to meet child’s goals

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Kids K Plan Medicaid Eligibility

- Family income under 138% FPL; or
- Child eligible for an I/DD waiver:
 - Only looks at child’s income (up to 300% SSI)
 - Must have determination from specialized DHS team that the child’s disabilities meet Social Security disability standards
 - This is NOT a Social Security Administration (SSA) determination.
 - DHS team name: Presumptive Medicaid Disability Determination Team (PMDDT)
 - CDDP assists family with waiver application.

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Review: Steps for Kids to Access K Plan Services

- IDD Eligibility (entry to the IDD System)
- K Plan Eligibility (entry to in-home supports):
 - Medicaid Eligibility through income or waiver; and
 - Level of care: without these services, the child would receive services in a hospital, nursing facility or institution.
- Needs Assessment: ADL and Relief Care Needs
- Individual Service Plan: Identifies support needs and creates a plan to meet child’s goals

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What can families expect during a needs assessment?

- Oregon’s assessment is called the “Child Needs Assessment” (CNA)
- Needs assessments are a series of personal questions that demonstrate two things:
 1. The kind of support a person needs; and
 2. The level of support a person needs.
- The CNA looks at support needs on a typical day – not an unusually hard or easy day.

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What else do families need to know about the CNA?

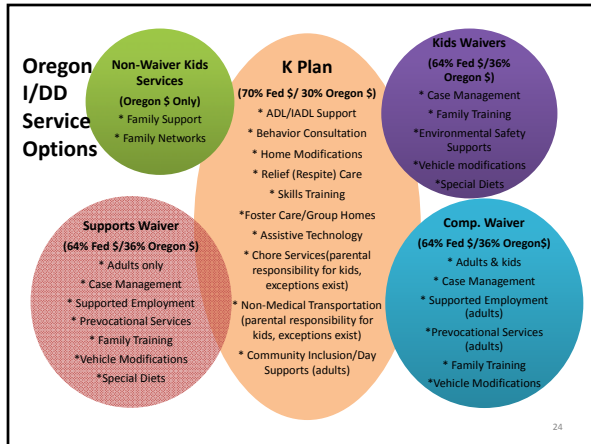
- The CNA emphasizes ADL/IADL supports.
 - Other supports are available, but may not be directly addressed in the assessment.
- The CNA is very clinical and deficit based.
- During the assessment appointment, families should also mention other support needs that may not be in the CNA.

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What can families expect at an Individualized Service Plan (ISP) Meeting?

- The ISP conversation does the following:
 - What does a full, happy day look like for your child and what supports do you need to get there?
 - Explores and identifies your goals for your child
 - Makes a plan for you to use available supports to head in that direction.

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Questions?

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