

DIVISION OF LONG TERM CARE

DATE: March 17, 2008

TO: Medicaid Waiver Manual Holders

FROM: The Bureau of Long Term Support

RE: Summary of February 2008 Medicaid Waiver Manual Release

The Bureau is pleased to announce the deployment of a new Medicaid Waiver manual revision. This release contains the new Chapter VII “Service Plan Recertification and Update.” This revised chapter includes new and updated information addressing annual recertification, plan review and ISP update requirements in the CIP1A/1B, BIW, CIP II/COP-W and CLTS waivers. This release also includes updated material for the currently available waiver manual Chapters II, III, IV, and VI. The table that follows below highlights the changes and additions to the manual outlined by page and section number. Please note that the table contains only a very short summary of what is new and what has been revised since the previous release. To gain a more complete understanding of the revision, manual holders are encouraged to read the complete documents as soon as time permits.

This revision will be posted to the Department website soon. The chapters which are being replaced with this revision will be made available in the manual archive. The archive is accessible from the waiver manual page. Questions about this revision may be directed to the appropriate waiver section at the Bureau of Long Term Support or to the applicable Quality Assurance contact.

New and Updated Material, Medicaid Waivers Manual – New Chapter VII and Revised and Updated Chapters II, III, IV and VI

Chapter	Page Number(s)	Section and Summary of Revision
Chapter II Waiver Eligibility	Page II – 5	Section 2.02 (D): Target group descriptions for the Children’s Long Term Support waivers have been updated.
	Page II – 11	Section 2.06: The Parental Payment Limit A new section was added describing the parental payment limit requirements in effect when children are served in the waivers.

Chapter	Page Number(s)	Section and Summary of Revision
Chapter II, continued	Pages II – 13 to II – 15	<p>Section 2.08: Eligible Living Situations The waiver-allowable living situation lists for the various programs have been updated to reflect variance policy changes.</p> <p>For CIP 1A/1B, The manual is updated to reflect current practice surrounding the need for a CBRF variance.</p>
		<p>Section 2.08 (continued)</p> <p>For CIP II/COP-W, CBRFs connected to nursing homes and CBRFs with more than twenty beds are now waiver allowable settings for certain participants with an approved variance.</p> <p>For CLTS waivers, Adult Family Homes are now allowable settings for participants age 18 - 22.</p>
	Pages II – 15 to II – 20	<p>Section 2.09: Introduction and Section 2.09(B) Waiver Participant Moves</p> <p>New text was added to clarify that funding sources referred to in the various waiver moves policies are Medicaid Waiver dollars, used for Medicaid Waiver allowable supports and services. Other funding sources, COP, CA, etc. and the ISP services they fund are not similarly transferable.</p>
		<p>Section 2.09 (C)</p> <p>Outdated Family Care waiver moves policy text was deleted. A link to the current policy described in a January, 2007 BLTS Memo is provided.</p>
Chapter III Financial Eligibility	Page III – 2	<p>Section 3.01 (C)</p> <p>A link to the financial eligibility “At a Glance” bulletin was added to allow manual users to more easily locate up-to-date financial eligibility information.</p>

Chapter	Page Number	Section and Summary of Revision
Chapter III, continued	Page III - 3	Section 3.03 (A) The Group A definition has been updated to include the new Badger Care Plus program.
Chapter IV Allowable Services	Page IV – 4	Section 4.05: New text addressing background checks for minors has been added.
	Page IV – 8	Section 4.06 (F): Updated to include CCS programs.
	Pages IV – 10 to IV – 12	Section 4.09 Allowable Services Index: Asterisks in the allowable service index are used to indicate that a comparable service is available in another waiver by another name.
	Pages IV – 18, 20, 81, 83 & 93	Section 4.10, Medicaid Waivers Allowable Services: The SPC pages were updated for Adult Family Homes (1-2 and 3-4 bed), Housing Counseling, Housing Start Up and Nursing Services to reflect a policy change that makes these services available in the CLTS Waivers.
	Page IV – 43	<p>SPC 506 – CBRF Requirements/Limitations/Exclusions section has been revised to reflect the policy change allowing the use of CIP II/COP-W in facilities with more than 20 beds or CBRFs connected to nursing homes - with an approved variance.</p> <p>NOTE: CBRFS connected to ICF-s MR or NH’s are not allowed in CIP 1A/1B and BIW.</p> <p>The CIP 1A/1B variance requirement to use CBRFs up to 8 beds has been deleted. It is no longer required.</p>

Chapter	Page Number	Section and Summary of Revision
Chapter IV, continued	Page IV – 56	<p>SPC 507 - Counseling and Therapeutic Resources Text updated to clarify habilitation/rehabilitation are allowable after EPSDT/Health Check services have been exhausted. The Standards have been revised to broaden service authorization to include: <i>‘approved by DHFS or its designee.’</i></p>
	Page IV – 85	<p>SPC 512 – Intensive In-Home Treatment Services The service has been redefined and the entire SPC has been revised and updated.</p>
	Page IV – 108 Page IV – 111	<p>SPC 103 – Respite Care The Service Requirements text was revised to clarify that Institutional Respite placement policies in CIP II/COP-W and CIP1A/1B and BIW differ.</p> <p>A Service Requirement was added addressing the requirement for a variance when using a CBRF larger than 20 beds or a facility connected to a nursing home for Residential Respite.</p>
Chapter VI The Waiver Application Packet	Page VI – 10	<p>Section 6.02 (I) Variance Requests: Introductory language updated to reflect waiver policy changes.</p>
	Page VI – 11	<p>Section 6.02 (I) (2) CIP II/COP-W: Revised text to reflect new policy regarding funding in facilities structurally connected to nursing homes and facilities larger than 20 beds with an approved variance.</p>

Chapter	Page Number	Section and Summary of Revision
Chapter VII Recertification Plan Review and ISP Update	Page VII - 1 through Page VII – 10	New Chapter VII: Service Plan Recertification and Update A new, revised and updated chapter replaces the 1996 paper/print version of the Waiver Manual (Chapter IV) for CIP II/COP-W. It also replaces the BDDS online version of Chapter VII for CIP 1A/1B, BIW.
	Page VII -1 Pages VII – 8 to VII – 10	Section 7.02 Annual Recertification The new chapter contains the individual waiver requirements for internally monitored (“self recertification”) and externally monitored annual waiver recertification. Sections 7.04 & 7.05 Plan Review and ISP Update Chapter VII also addresses the requirements for the six month Plan Review and Service Plan Updates. A “Quick Reference Guide” containing ISP Update requirements is provided.