In the 1980s the Federal government allowed states to apply for Federal Medicaid funds to pay for home and community based services, referred to as Home and Community Based Services Waiver Program. What a person is “waiving” is the right to an Intermediate Care Facility (ICF/DD). There are four waiver categories: Basic Plus, Core, Community Protection and Children’s Intensive In-home Behavioral Support (CIIBS). Waiver enrollment is based on funding and capacity. Individuals must need the level of care provided in an ICF/DD and agree to accept waiver services as an alternative to institutional services. Below are the services provided and the annual spending limit for each service:

**Basic Plus Waiver Services:**
- **Personal Care**—limits determined by the DDD assessment.
- **Respite Care**—limits determined by the DDD assessment.
- **Skilled Nursing and all of the services in the Aggregate Services package for Basic Waiver**—$6,192 per year on any combination of these services.
- **Adult Family Home (AFH) or Adult Residential Care (Boarding Home)**—determined per department rate structure.
- **Employment/Day Program Services**—may not exceed $9,944 per year.
- **Mental Health Stabilization Services**—limits determined by a Mental Health professional or DDD.
- **Emergency Assistance**—$6,000 per year, pre-authorization required.

**CIIBS Waiver Services:** Ages 8 through 20 years old, living with their family and assessed at high or severe risk of out-of-home placement due to challenging behaviors. Total average cost of service, including Personal Care and Respite is $4,000 per month per client.
- **All individuals receive:** Behavior Management and Consultation and Staff/Family Training and Consultation
- **Additional services include:** Assistive Technology, Specialized Nutrition, Specialized Clothing, Therapeutic Equipment/Supplies, Vehicle Modification
- **All of the Basic Waiver Aggregate Services except:** Community Guide
- **Personal Care**—limits determined by the DDD assessment; service costs included in the $4,000/month average
- **Respite Care**—limits determined by the DDD assessment; service costs included in the $4,000/month average
- **Sexual Deviancy Evaluation**—limits determined by the DDD assessment.

**Core Waiver Services (for individuals at risk of immediate out-of-home placement):**
Limited to average cost of an ICF/DD for any combination of services. Respite & Personal Care Service limits determined by the DDD assessment. Limits for Mental Health Stabilization Services determined by a Mental Health professional or DDD.
- **Residential Habilitation, Community Transition and all of the Basic Plus services except:** Adult Family Home (AFH), Adult Residential Care Services and Emergency Assistance

**Community Protection Waiver Services (for individuals assessed to require 24-hour, on-site staff supervision to ensure the safety of others). The individual must agree to the Community Protection Individual Support Plan):**
Limited to the average cost of an ICF/DD for any combination of services. Residential services offered only by certified Community Protection Residential Services providers.
- **All Core services except:** Personal Care, Respite, Community Guide, Community Access