# Developmental Disabilities Administration

## Fact Sheets

### Waiver Services

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Waiver Eligibility

Recipients must meet the following criteria:

- Be an eligible DDA client per RCW 7A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the 50 federal benefit standard.
  - If a child, parents’ income and resources are not considered.
  - If an adult living with a spouse, the spouse’s income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities program.
- The person-centered service plan shows how health, safety and habilitation needs can be met in the community by a monthly waiver service and/or monitoring.
- Agree to accept home and community-based services rather than an ICF/MR.
- For CIIBS only, recipients must also:
  - Be age 8 through 17 for initial enrollment (served through age 20);
  - Be initially assessed at high or severe risk of out-of-home placement due to challenging behaviors; and
  - Live with family who agree to participate in the CIIBS program.
- For F3 only, recipients must also:
  - Live in the family home.
- For Community Protection only, recipients must also:
  - Be age 18 or older; and
  - Meet eligibility criteria in WAC 388-831-6000.

Access to a Waiver

A request for enrollment, or to switch to an alternate waiver can be done at any time. Ask a case manager if a CRM is not available; leave a message on the local No-Past Service line listed under Regional Offices or submit the request on-line at www.dds.wa.gov/dda/services-and-information-request.

Meeting service criteria for the waiver does not guarantee access to waiver services. Each waiver is limited to the number of people who can be served. DDA has the authority to limit waiver enrollment based on the availability of funding for new waiver participants.

Administrative Hearing Rights

Everyone has the right to an administrative hearing with any of the following decisions regardless of program or service:

- DDA eligibility is denied, terminated, or DDA has unreasonably delayed acting on an application, or
- Type or amount of service authorized to receive, or
- Denial, reduction, or termination of services, or
- Denial of choice of service provider, or
- If moved to a different residential setting, not of one’s own choice, or
- DDA refusal to abide by request not to send notices to any other person, or
- Disenrollment from a waiver program, or
- Denial of request to receive ICF/MR services instead of waiver services; or
- DDA decides the services available on a current waiver can meet the health and welfare needs and a person disagrees; or
- A person is assessed as not needing ICF/MR level of care; or
- One has been assessed as not meeting CIIBS eligibility.

For more information, visit the DDA website at: www.dds.wa.gov/dda
Waiver Services

Use this brochure to plan for annual assessments. A case resource manager will explain services and document services selected in the person-centered service plan. Some services require prior review and approval before use. Ask a CRM about what information is needed for prior approval. Services in four categories with waiver and age limits include:

- **Community services** – promote client participation and integration in the community
- **Professional services** – support services provided by contracted professionals
- **Caregiving services** – supports for participants and caregivers
- **Goods and services** – equipment, supplies and specialized services for participants

**Community Services**
- **Community engagement** – services to increase connections and engagement in community supports. 18+, 21+
- **Community inclusion** – individualized support services connect people in the local community to build relationships with others who share similar interests. Basic Plus, Core, CP waivers only
- **Peer mentoring** – peer mentors use personal experiences to provide support and guidance. CP waiver only
- **Person-centered plan facilitation** – a life-planning process to increase personal self-determination and develop an action plan. CP waiver only
- **Residential habilitation** – assistance to learn, improve, or retain the social and adaptive skills necessary for living in the community. Core, CP waivers only
- **Supported employment** – intensive, ongoing individual and group support to obtain and sustain employment. Basic Plus, Core, CP waivers only. 21+
- **Transportation** – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCRB

**Professional Services**
- **Stabilization services** – services to assist and support during a behavioral health crisis. Includes specialized habilitation, staff family consultation and crisis diversion bed services.
- **Music therapy** – musical interventions to promote progress on individual goals. CP waiver only
- **Equine therapy** – musical interventions to promote progress on individual goals. CP waiver only
- **Positive behavior support and consultation** – supports that assess and address behavioral health needs. These include direct interventions to promote behaviors that improve quality of life and inclusion in the community. 21+ except CP waiver only
- **Risk assessment** – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.
- **Staff/family consultation** – professional consultation to family and direct service providers to better meet needs. Counseling available on 18+, Basic Plus, CP waiver only.
- **Supported parenting** – services include teaching, parent coaching, and other supportive strategies. CP waiver only
- **Therapies** – occupational, physical and speech language and hearing services beyond those provided by Medicaid (Apple Health). 18+, Basic Plus, Core, CP waiver only

**Caregiving Services**
- **Respite** – short-term relief to individuals who live with and care for persons with disabilities. Basic, Basic Plus, Core, CP waiver only
- **Skilled nursing** – chronic, long-term nursing services to address needs not met through Medicaid (Apple Care). Basic, Basic Plus, Core, CP waiver only.

**Goods and services**
- **Assistive technology** – products and training used to improve or maintain functional abilities. CP waiver only
- **Bed bug extermination** – treatment for bed bug infestations. Basic Plus, Core, CP waiver only
- **Environmental adaptations** – physical modifications to a home necessary for one to continue living in the community.
- **Specialized clothing** – non-restrictive clothing adapted to the needs of a disability. CP waiver only
- **Specialized equipment and supplies** – necessary equipment and supplies not available under Medicaid (Apple Health) including equipment and supplies needed to implement therapeutic or positive behavioral support plans.
- **Therapeutic adaptations** – modifications to the home environment to reduce or eliminate stressors. Basic Plus, CP waiver only
- **Vehicle modifications** – adaptations to a vehicle that accommodates a person’s needs and supports community integration. Basic, 18+, Core only

**Wellness education** – monthly individualized print educational letter designed to assist in managing health-related issues and achieving wellness goals. Basic, Basic Plus, Core only
Children's Intensive In-home Behavioral Support Overview

The Children's Intensive In-home Behavioral Support program is designed to support up to 200 children at high risk of out-of-home placement due to challenging behaviors and help them live successfully at home with their families. The goals are to improve support to families and strengthen their child's success in the family home and community. Positive behavior support and wraparound service planning are the key elements of the model.

Each family chooses and partners with a contracted behavior specialist. The behavior specialist conducts a functional behavior assessment of the child and develops and oversees a positive behavior support plan that fits the child and family. Behavior technicians work directly with the child and family to deliver behavior supports outlined in the plan.

Individualized support planning is collaborative, and team based. Each child and family team includes family members, friends, service providers, school staff and others important in the child and family's life. Planning builds on strengths and works toward outcomes driven by the family.

Eligibility Requirements

Individuals who:

- Have been determined a client of the Developmental Disabilities Administration and are age eight or older and under the age of 18 for initial enrollment and under age 21 for continued enrollment.
- Meet disability criteria established in the Social Security Act.
- Live with his/her/their family.
- Meet Intermediate Care Facility for Individuals with Intellectual Disabilities level of care criteria.
- Have a DDA assessment and Person-Centered Service Plan that describe how the child’s health, safety and habilitation needs will be met in the community.
- Have agreed to accept home and community-based services and the CIIBS service delivery model as an alternative to institutional services.
- Have been assessed at high or severe risk of out-of-home placement due to challenging behaviors prior to enrollment in the program.
Service include: Assistive Technology • Environmental Adaptations • Equine Therapy • Positive Behavior Support and Consultation (Only available to clients 20 and younger who are currently receiving the service as of 10/1/2020) • Music Therapy • Nurse Delegation • Respite • Risk Assessment • Specialized Clothing • Specialized Equipment and Supplies • Specialized Habilitation • Stabilization Services-Specialized Habilitation • Stabilization Services-Staff and Family Consultation • Stabilization Services-Crisis Diversion Bed • Staff and Family Consultation • Therapeutic Adaptation • Transportation • Vehicle Modification.

Authority

- Chapter 71A.24 RCW, Intensive Behavior Support Services
- Chapter 388-845 WAC, DDD Home and Community Based Services Waivers

Budget

We do not currently budget to this level of detail, or track expenditures by waiver as they cross multiple budget units.

Rates

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Individual service rates can be found at: https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management

Partners

- Individuals receiving services
- Families of program participants

- Aging and Long-Term Support Administration
- Department of Children, Youth and Families
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Service Providers
- Washington State Developmental Disability Council

Oversight

External

- ALTSA Residential Care Services Division
- Department of Children, Youth and Families
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- State Auditor’s Office
- Washington State Department of Health

Internal

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit

Information Contact

Developmental Disabilities Administration
Jaime Bond, Interim Chief, Office of Program and Policy Development
360-407-1567
Email: Jaime.Bond@dshs.wa.gov
Website: https://www.dshs.wa.gov/dda/
Waiver Eligibility

Recipients must meet all of the following criteria:

- Be an eligible client of DDA per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the federal benefit standard.
- For children who receive waiver services, parents’ income and resources are not considered.
- Have resources less than $2,000 or have any additional resources above $2,000 in a protected special needs trust such as an Endowment Trust Fund or an ABLE account.
- Meet the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities as determined by the DDA assessment.
- Person-centered service plan shows how health, safety, and habilitation needs can be safely met in their family home with a monthly waiver service and/or monthly monitoring.
- Agree to accept home and community-based services rather than receive services in an ICF/IID.
- CIIBS participants must also:
  - Be aged 8 through 17 for initial enrollment.
  - Be determined in their care assessment to be at high or severe risk for out-of-home placement due to challenging behaviors.
  - Live with family member who agrees to participate in the CIIBS program.
  - Live with family member who agrees to participate in the CIIBS program.

Access to a Waiver

A request to enroll, or switch to an alternate waiver can be done at any time. Ask a case resource manager or call the DDA region to find out which waiver is available. If the CIIBS is not available, leave a message on the local No-Paid Service Line listed under Regional Offices or submit the request online at www.dshs.wa.gov/dda/service-and-information-request. Each waiver is limited to the number of people served, DDA has the authority to limit enrollment based on the availability of funding for new waiver recipients.

Meeting service criteria for the waiver does not guarantee access to waiver services.

Administrative Hearing Rights

Everyone has the right to an administrative hearing with the following decisions regardless of program or service:

- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on an application;
- Type or amount of service authorized to receive;
- Denial, reduction, or termination of services;
- Denial of choice of service provider;
- If moved to a different residential setting, not of one’s choice;
- DDA refusal to abide by request to send notices to any other person;
- Disenrollment from a waiver program;
- Denial of request to receive ICF/IID services instead of waiver services;
- DDA decides that the services available on current waiver can meet health and welfare needs and a person disagrees;
- A person is assessed to not need ICF/IID level of care;
- One has been assessed to not meet CIIBS eligibility.

Visit us online at: dshs.wa.gov/dda/service-and-information-request
Find an office at: https://www.dshs.wa.gov/dda/find-dda-office
Call us:

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<tr>
<td>Chelan, Douglas, Ferry, Grant, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens</td>
<td>(800) 319-7116 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
</tr>
<tr>
<td>Adams, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, Yakima</td>
<td>(866) 715-3646 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
</tr>
<tr>
<td>Island, San Juan, Skagit, Snohomish, Whatcom</td>
<td>(800) 567-5882 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
</tr>
<tr>
<td>King</td>
<td>(800) 974-4428 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
</tr>
<tr>
<td>Kittitas, Pierce</td>
<td>(800) 733-6740 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
</tr>
<tr>
<td>Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Skamania, Thurston, Walla Walla</td>
<td>(888) 707-1302 RI:<a href="mailto:ServiceRequest@ddaa.wa.gov">ServiceRequest@ddaa.wa.gov</a></td>
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For more information and a list of service providers and resources visit the Washington State Department of Social and Health Services website at dshs.wa.gov/transforming-lives.
Waiver Overview

Department of Social and Health Services’ Developmental Disabilities Administration has five home and Community-based Support waiver programs. Each waiver offers specific services to meet health and safety needs in the community. The Children’s Intensive In-Home Behavioral Support waiver offers a variety of services when not available through any other resources (private insurance, Medicaid, school, etc.).

Children’s Intensive In-Home Behavioral Support waiver supports youth at risk of out-of-home placement due to challenging behaviors. The CIIBS model involves wraparound planning and family-centered positive behavior support. The CIIBS waiver serves persons aged between 8 and 20.

If the assessed need for services exceeds the defined scope of services provided under the CIIBS waiver, ESA will make one or more of the following efforts to meet health and welfare needs:

- Assist participants to identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the CIIBS waiver other than natural supports;
- Provide an application for an alternative waiver that includes the services needed.

If none of the above options meet the health and welfare needs of the CIIBS waiver participant, ESA may terminate waiver eligibility. If terminated from a waiver, persons may still be eligible for other non-waiver ESA services or placement in an ICF/MR care facility.

Waiver Services

Use this brochure to plan for annual assessments. A case resource manager will explain services and requirements, and document the services selected in the person-centered service plan. Some services require prior review and approval. Ask the CRM what information is needed for prior approval. Services in four categories include:

- **Community services** – promote client participation and integration in the community
- **Professional services** – support services provided by contracted professionals
- **Caregiving services** – supports for participants and their caregivers
- **Goods and services** – equipment, supplies and specialized services for participants

Use check boxes to show the CRM which services are of interest:

### Community Services

- **Transportation** – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCSP

### Professional Services

- **Stabilization services** – services to assist and support during a behavioral health crisis. This includes specialized habilitation, staff/family consultation and crisis diversion bed services.
- **Specialized habilitation** – individualized support to learn or maintain a range of life skills.
- **Positive behavior support and consultation** – supports that address behavioral health needs. These include direct interventions to promote behaviors that improve quality of life and inclusion in the community. No new enrollments after 10/1/2020.
- **Risk assessment** – evaluations of violent, staking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.
- **Staff/family consultation** – professional consultation provided to family and direct service providers to better meet needs. Counseling available.

### Professional Services (continued)

- **Equine therapy** – equine experience to promote emotional and physical growth to support a primary behavioral health plan.
- **Music therapy** – musical interventions to promote progress on individual goals that support a primary behavioral health plan.

### Caregiving Services

- **Respite** – short-term relief to individuals living with and caring for clients.

### Goods and Services

- **Assistive technology** – products and training used to improve or maintain functional abilities.
- **Environmental adaptations** – physical modification to the home, necessary for the participant to continue living in their family home.
- **Specialized clothing** – non-restrictive clothing adapted to the needs related to the disability.
- **Specialized equipment and supplies** – necessary equipment and items not available under Medicaid (Apple Care) including equipment and devices needed to implement therapeutic or positive behavioral support plan.
- **Therapeutic adaptations** – modifications to the home environment to reduce or eliminate sensory processing stressors.
- **Vehicle Modifications** – adaptations to a vehicle that accommodates needs and supports community integration.
Individual and Family Services Waiver Overview

The Individual and Family Services waiver is designed to successfully support up to 7,572 participants who live with a family member.

Participants are assessed and assigned an annual budget allocation with which they can choose and purchase services. Annual budget allocations are:

- $1,560
- $2,340
- $3,120
- $4,680

Stabilization services are paid for outside of the annual budget allocations.

Service include: assistive technology • environmental adaptations • positive behavior support and consultation (only available to clients 20 and younger who are currently receiving the service as of 10/1/2020) • nurse delegation • peer mentoring • person-centered plan facilitation • respite • risk assessment • skilled nursing • specialized clothing • specialized equipment and supplies • specialized habilitation • stabilization services-specialized habilitation • stabilization services-staff and family consultation • stabilization services-crisis diversion bed • staff and family consultation • supported parenting • therapeutic adaptation • transportation • vehicle modification.

Eligibility Requirements

Individuals who:

- Have been determined a client of the Developmental Disabilities Administration.
- Meet disability criteria established in the Social Security Act.
- Live with his/her/their family.
- Meet Intermediate Care Facility for Individuals with Intellectual Disabilities level of care criteria.
- Have a DDA assessment and Person-Centered Service Plan that describe how the participant’s health, safety, and habilitation needs will be met in the community.
- Have agreed to accept home and community-based services as an alternative to institutional services.
Authority

- **Chapter 71A.24 RCW, Intensive Behavior Support Services**
- **Chapter 388-845 WAC, DDA Home and Community Based Services Waivers**

Budget

Budgets are not allocated by individual waivers but by collections of waiver services across waivers.

Rates

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Individual service rates can be found at: [https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management](https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management)

Partners

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- Department of Children, Youth and Families
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Service providers
- Washington State Developmental Disabilities Council

Oversight

External

- AL TSA Residential Care Services Division
- Department of Children, Youth and Families
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- State Auditor’s Office
- Washington State Department of Health

Internal

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit

Information Contact

Developmental Disabilities Administration
Jaime Bond, Interim Chief, Office of Program and Policy Development
360-407-1567
Email: [Jaime.Bond@dshs.wa.gov](mailto:Jaime.Bond@dshs.wa.gov)
Website: [https://www.dshs.wa.gov/dda/](https://www.dshs.wa.gov/dda/)
Waiver Eligibility
A person must meet all of the following criteria:
- Be an eligible client of DDA per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
  - If a child, parent’s income and resources are not considered.
  - If an adult living with a spouse, the spouse’s income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities program.
- Meets the level of care provided in an intermediate care facility for individuals with intellectual disabilities as determined by the DDA assessment.
- An individual’s person-centered service plan shows how health, safety, and habilitation needs can be met in the community with a waiver service and/or support.
- Agree to accept home and community-based services rather than an ICF/IID.
- For IFS only, a person must also:
  - Live in the family home. This means living with at least one other family member, a spouse, natural, adoptive or stepparent, child, stepchild, sibling, stepibling, aunt, uncle, grandparent, first cousin, niece or nephew.

Access to a Waiver
An individual may request enrollment on a waiver or different waiver at any time. Ask the case manager if the person does not have a CRM, leave a message on the local No-Paid Service line listed under Regional Offices or submit the request online at www.dshs.wa.gov/dda/service-and-information-request.

Meeting service criteria for the waiver does not guarantee access to waiver services. Each waiver has a limit on the number of people who can be served. DDA has the authority to limit enrollment in the waivers based on the availability of funding for new waiver participants.

Administrative Hearing Rights
Individuals have the right to an administrative hearing with any of the following decisions regardless of program or service:
- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on an application; or
- Type or amount of service authorized to receive; or
- Denial, reduction, or termination of services; or
- Denial of choice of service provider; or
- If a person is moved to a different residential setting, not of their choice; or
- DDA refusal to abide by the request not to send notices to any other person; or
- Disenrollment from a waiver program; or
- Denial or request to receive CF/1ID services instead of waiver services; or
- DDA decides the services available on the current waiver can meet the health and welfare needs and the person disagrees; or
- An individual has been assessed to not need ICF/IID level of care; or
- A person has been assessed to not meet AIBS eligibility.

Visit us online at: www.dshs.wa.gov/dda/service-and-information-request
Find an office at: www.dshs.wa.gov/DDA/dda/find-an-office
Call us:

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<tr>
<td>Okanogan, Ferry,</td>
<td>(800) 319-7116</td>
<td>King</td>
<td>(888) 974-4328</td>
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<td>Lincoln, Clark,</td>
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<td>Stevens</td>
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<td>Adams, Benton,</td>
<td>(866) 715-3646</td>
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<td>Franklin, Garfield,</td>
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<td>King</td>
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Washington State Department of Social & Health Services
Transforming lives
DHHS-23-1288 (Rev 10/2023)
Waiver Overview
Washington State Department of Social and Health Services' Developmental Disabilities Administration has five Home and Community-Based Service Medicaid Waiver programs. Each waiver offers specific services to meet an individual's health and safety needs in the community as opposed to an institution. The Individual and Family Services waiver offers a variety of services when services are not available through any other resource (private insurance, Medicare, school, etc.).

Individual and Family Services Waiver supports individuals who require waiver services to remain in the family home. Individuals must live with a family member. Services are limited by the amount of the annual allocation, which is determined by the DDA assessment ($1,200; $1,800; $2,400; or $3,600).

If the assessed need for services exceeds the scope of service provided under the IFS waiver, DDA will make one or more of the following efforts to meet health and welfare needs:

- Identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the IFS waiver other than natural supports;
- Offer application for an alternative waiver that has the services needed;
- Offer placement in an intermediate care facility for individuals with intellectual disabilities.

If none of the above options are successful in meeting health and welfare needs, DDA may terminate the waiver eligibility. If terminated from a waiver, individuals may qualify for other non-waiver DDA services.

Waiver Services
Use this brochure to plan an individual's annual assessment. A case manager will outline services and requirements, and document services selected in the person-centered service plan. Some services require prior review and approval. Ask their CRM what information is needed. Services in four categories with age limits include:

- Community services – promote client participation and integration in the community
- Professional services – support services provided by contracted professionals
- Caregiving services – supports for participants and their caregivers
- Goods and services – equipment, supplies and specialized services for participants

Use check boxes to show the CRM which services are of interest:

Community Services
- Community engagement – services to increase connections and engagement in community supports
- Peer mentoring – using personal experiences to provide support and guidance to individuals and family
- Person-centered plan facilitation – a life planning process to increase personal self-determination and develop an action plan
- Transportation – reimbursement to provider for non-medical transportation required to access waiver services specified in a PESP

Professional Services
- Stabilization services – services to assist and support when a person experiences a behavioral health crisis. Includes specialized habilitation, staff or family consultation and crisis diversion bed
- Positive behavior support and consultation – supports that assess and address behavioral health needs. These include interventions to improve quality of life and community inclusion, 0-20
- Risk assessment – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.
- Specialized habilitation – individualized support to learn or maintain a range of life skills
- Staff/family consultation – professional training and consultation to family and direct service providers to better meet a person's needs. Counseling available.
- Therapies – occupational, physical and speech, language and hearing services beyond those provided by Medicaid (Apple Health), 21+

Caregiving Services
- Respite – short-term relief to individuals who live with and care for an individual with developmental and intellectual disabilities.
- Skilled nursing – chronic, long-term, services to address needs not met through Medicaid (Apple Care), 21+

Goods and Services
- Assistive technology – products and training used to improve or maintain functional abilities
- Environmental adaptations – physical modifications necessary for one to continue living in the community
- Specialized clothing – nonrestrictive clothing adapted to the needs related to the disability
- Specialized equipment and supplies – necessary equipment and supplies not available under Medicaid (Apple Care) including equipment and supplies needed to implement therapeutic or positive behavioral support plan
- Therapeutic adaptations – modifications to the home environment to reduce or eliminate stressors
- Vehicle modifications – adaptations to a vehicle that accommodates needs and supports community integration
- Wellness education – monthly, individualized printed, educational letter designed to assist in managing health-related issues and achieving wellness goals
Basic Plus Waiver Overview

The Basic Plus waiver is one of the Developmental Disabilities Administration’s five federal Home and Community Based Services (HCBS) waivers. The Basic Plus waiver offers supports up to 11,571 individuals who are at risk of losing their current living situation and require waiver services to meet their health and welfare needs in their own home, their family’s home, or in other settings.

Services Include

**DDA Assessment-based Services:** Community Inclusion • Individual/Group Supported Employment • Individualized Technical Assistance • Respite • Risk Assessment • Stabilization Services-Specialized Habilitation • Stabilization Services-Staff and Family Consultation • Stabilization Services-Crisis Diversion Bed

**Aggregate Services up to $6,192/year**: Assistive Technology • Community Engagement • Environmental Adaptations • Extermination of Bed Bugs • Occupational, Speech and Physical Therapies (for adults, when not covered under state plan benefits) • Positive Behavior Support and Consultation (Only available to clients 20 and younger who are currently receiving the service as of 10.1.2020) • Skilled Nursing (over age 21) • Specialized Equipment and Supplies • Specialized Habilitation • Staff and Family Consultation • Therapeutic Adaptation • Transportation • Wellness Education

*Participants may also have access to emergency assistance are limited to an additional combined total of $6,000 per year.

Eligibility Requirements

Individuals who:

- Have been determined to be an eligible client by the Developmental Disabilities Administration
- Meet Social Security Disability criteria
- Meet Institutional Level of Care (ICF/IID) criteria
- Meet the income and resource standards for Apple Health of Washington. (Client’s income and resources, not family unit’s income and resources)
- Are a U.S. citizen or federally qualified legal resident
- Accept home and community-based services as an alternative to institutional services.
Waivers are limited to the average cost of an Intermediate Care Facility for Individuals with Intellectual Disabilities for any combination of services necessary to meet the assessed client need. The Department cannot deny services to people on the waiver due to lack of funding. Consequently, DDA carefully monitors waiver expenditures.

**Authority**

- Title XIX federal funding through §1915(c) Home and Community Based Services waiver and state funding
- [Chapter 388-845 WAC, DDA Home and Community Based Services Waivers](https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management)

**Rates**

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Service rates can be found at: [https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management](https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management)

**Partners**

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- Department of Children, Youth and Families

**Oversight**

**External**

- ALTSA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- State Auditor’s Office
- Washington State Department of Health

**Internal**

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit

**Information Contact**

Ann Vasilev
Waiver Services Unit Manager
ann.vasilev@dshs.wa.gov
360-407-1551

DDA website [https://www.dshs.wa.gov/dda/](https://www.dshs.wa.gov/dda/)

Washington State Department of Social and Health Services
Waiver Eligibility

Recipients must meet all criteria:
- Be an eligible client of DDA per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
  - If a child, parent's income and resources are not considered.
  - If an adult living with a spouse, the spouse's income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities (HWID) program.
- Meets the level of care provided in an intermediate care facility for individuals with intellectual disabilities as determined by the DDA assessment.
- A person-centered service plan shows how health, safety, and habilitation needs can be met in the community with a monthly waiver service and/or monitoring.
- Agree to accept home and community-based services rather than an ICF/IID.

Access to a Waiver

A request for enrollment, or to switch to an alternate waiver can be done at any time. Ask a care resource manager if a CRM is not available, leave a message on the local No-Fault Service line listed under Regional Offices or submit the request on-line at www.dshs.wa.gov/dda/service-and-information-request.

Meeting service criteria for the waiver does not guarantee access to services. Each waiver has a limit on the number of people who can be served. DDA has the authority to limit enrollment based on the availability of funding for new waiver participants.

Administrative Hearing Rights

Everyone has the right to an administrative hearing with any of the following decisions regardless of program or service:
- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on an application; or
- Type or amount of service authorized to receive; or
- Denial, reduction, or termination of services; or
- Denial of choice of service provider; or
- If moved to a different residential setting, not of one's choice; or
- DDA refusal to abide by a request not to send notices to any other person; or
- Disenrollment from a waiver program; or
- Denial of request to receive ICF/IID services instead of waiver services; or
- DDA decides that the services available on current waiver can meet health and welfare needs and person disagrees; or
- One has been assessed to not need ICF/IID level of care.
Waiver Overview
The Department of Social and Health Services
Developmental Disabilities Administration has five
Home and Community-Based Service Medicaid Waiver
programs. Each waiver offers specific services to meet
health and safety needs in the community. The Basic
Plus waiver offers a variety of services not available
through other resources (private insurance, Medicaid,
school, etc.).

The Basic Plus waiver supports individuals who require
waiver services to meet their assessed health and
safety needs in the community. Services are provided
in their home, family home, in an adult family
home or adult residential center. The Basic Plus waiver
serves individuals of all ages.

If the assessed need for services exceeds the scope of
service provided under the Basic Plus waiver, DDA
will make one or more of the following efforts to meet
health and wellness
• Identify more available natural supports;
• Initiate an exception to rule to access available,
nonwaiver services not included in the Basic Plus
waiver other than natural supports;
• Offer the application to apply for an alternative
waiver that has the services needed;
• Offer placement in an ICF/IID.

If none of the above options meet the health and
wellness needs, DDA may terminate waiver eligibility.
Terminated from a waiver, a person can qualify for
other non-waiver DDA services.

Waiver Service
Use this brochure to plan for an annual assessment.
A case resource manager will explain services and
requirements, and document services selected in the
person-centered service plan. Some services require
review and approval before they are delivered. Ask
the CRM about what information is needed for prior
approval. Services in four categories with age limits
include:

- Community services – promote client participation
  and integration in the community
- Professional services – support services provided by
  contracted professionals
- Caregiving services – supports for participants and
  their caregivers
- Goods and services – equipment, supplies and
  specialized services for participants

Use check boxes to show the CRM which services are
of interest:

Community Services
- Community engagement – supports to increase
  connections and engagement in community
  resources.
- Community inclusion – individualized support
  services that connect people in their local
  community to build relationships with others who
  share similar interests.
- Supported employment – intensive, ongoing
  individual and group support to obtain and sustain
  employment.
- Transportation – reimbursement to a provider
  for non-medical transportation required to access
  waiver services specified in one’s PCSP.

Professional Services
- Stabilization services – Assistance and support
during a behavioral health crisis. The services
include specialized habilitation, staff/family
consultation and crisis diversion bed services.
- Positive behavior support and consultation
  – supports that assess and address behavioral
  health needs. These include interventions to
  promote behaviors that improve quality of life and
  community inclusion.
- Risk assessment – evaluations of violent,
stalking, sexually violent, or predatory behavior to
determine the need for psychological, medical or
therapeutic services.
- Specialized habilitation – individualized support
  to learn or maintain a range of life skills.
- Staff/family consultation – professional
  consultation to family and direct service providers
to better meet needs. Counseling available.
- Therapies – occupational, physical and speech,
  language and hearing services beyond those
  provided by Medicaid (Apple Health).

Caregiving Services
- Respite – short-term relief to individuals living
  with and caring for clients.
- Skilled nursing – chronic, long-term, services to
  address needs not met through Medicaid (Apple
  Care), 24/7.

Goods and Services
- Bed bug extermination – treatment for bed bugs in the home.
- Therapeutic accommodations – modifications to
  the home environment to reduce or eliminate
  stressors.
- Environmental accommodations – physical
  modification to the home necessary for a person
to continue living in the community.
- Specialized equipment and supplies –
  necessary equipment and supplies not
  available under Medicaid (Apple Care) including
  equipment and supplies needed to implement
  therapeutic or positive behavioral support plan.
- Wellness education – monthly, individualized,
  printed educational letter designed to assist in
  managing health-related issues and achieving
  wellness goals.
Core Waiver Overview

The Core Waiver is one of the Developmental Disabilities Administration’s five federal Home and Community Based Services (HCBS) waivers. It offers residential habilitation services to 5,624 individuals who are at immediate risk of losing their community residential setting. Individuals must have an identified health and welfare need for residential services that cannot be met by the Basic Plus waiver.

Services Include

- Assistive Technology
- Community Engagement
- Community Inclusion
- Community Transition
- Environmental Adaptations
- Extermination of Bed Bugs
- Individual/Group Supported Employment
- Individualized Technical Assistance
- Occupational, Speech and Physical Therapies (for adults, when not covered under state plan benefits)
- Positive Behavior Support and Consultation (Only available to clients 20 and younger who are currently receiving the service as of 10.1.2020)
- Residential Habilitation
- Respite
- Risk Assessment
- Skilled Nursing (over age 21)
- Specialized Equipment and Supplies
- Specialized Habilitation
- Stabilization Services
- Staff and Family Consultation
- Stabilization Services-Crisis Diversion Bed
- Staff and Family Consultation
- Transportation
- Wellness Education

Eligibility Requirements

Individuals who:

- Have been determined to be an eligible client by the Developmental Disabilities Administration
- Meet Social Security Disability criteria
- Meet Institutional Level of Care (ICF/IID) criteria
- Meet the income and resource standards for Apple Health of Washington. (Client’s income and resources, not family unit’s income and resources)
- Are a U.S. citizen or federally qualified legal resident
- Accept home and community-based services as an alternative to institutional services.
Waivers are limited to the average cost of an Intermediate Care Facility for Individuals with Intellectual Disabilities for any combination of services necessary to meet the assessed client need. The Department cannot deny services to people on the waiver due to lack of funding. Consequently, DDA carefully monitors waiver expenditures.

**Authority**

- Title XIX federal funding through §1915(c) Home and Community Based Services waiver and state funding
- [Chapter 388-845 WAC, DDA Home and Community Based Services Waivers](https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management)

**Rates**

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Service rates can be found at: [https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management](https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management)

**Partners**

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- Department of Children, Youth and Families

**Oversight**

**External**

- ALTSA Residential Care Services Division
- Department of Children, Youth and Families
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- State Auditor’s Office
- Washington State Department of Health

**Internal**

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit

**Information Contact**

Ann Vasilev
Waiver Services Unit Manager
Ann.vasilev@dshs.wa.gov
360-407-1551

DDA website [https://www.dshs.wa.gov/dda/](https://www.dshs.wa.gov/dda/)
Waiver Eligibility

Recipients must meet all of the following criteria:

- Be an eligible DDA client per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
- If a child, parents’ income and resources are not considered.
- If an adult living with a spouse, the spouse’s income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities (AHWD) program.
- Meets the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities as determined by the DDA Assessment.
- Person-centered service plan shows how health, safety, and habilitation needs can be met in the community with a monthly waiver service and/or monthly monitoring.
- Agree to accept home and community-based services rather than an ICF/IID.

Access to a Waiver

A request for enrollment or switch to an alternate waiver can be done at any time. Ask a case resource manager if a CRM is not available, leave a message on the local No-Visit service line listed under Regional Offices or submit the request online at www.dshs.wa.gov/dda/service-and-information-request. Meeting service criteria for the waiver does not guarantee access to waiver services. Each waiver is limited on the number of people served. DDA has the authority to limit enrollment based on the availability of funding for new waiver participants.

Administrative Hearing Rights

Everyone has the right to an administrative hearing with the following decisions regardless of program or service:

- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on application; or
- Type or amount of service authorized to receive; or
- Denial, reduction, or termination of services; or
- Denial of choice of service provider; or
- If moved to a different residential setting, not of one’s choice; or
- DDA refusal to abide by request not to send notices to any other person; or
- Disenrollment from a waiver program; or
- Denial of request to receive ICF/IID services instead of waiver services; or
- DDA decides the services available on current waiver can meet health and welfare needs and a person disagrees; or
- A person is assessed to not need ICF/IID level of care; or
- One has been assessed to not meet ICF/IID eligibility.

Core Waiver

From the Developmental Disabilities Administration

Visit us online at: dshs.wa.gov/dda/service-and-information-request
Find an office at: dshs.wa.gov/DDA/office-locations

Call us:

<table>
<thead>
<tr>
<th>Counties</th>
<th>Phone and Email</th>
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</thead>
<tbody>
<tr>
<td>Chelan, Douglas, Ferry, Grant, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens</td>
<td>(800) 319-7116  [<a href="mailto:ServiceRequests@chelan.wa.gov">ServiceRequests@chelan.wa.gov</a>]</td>
</tr>
<tr>
<td>Adams, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, Yakima</td>
<td>(866) 715-3646  [<a href="mailto:ServiceRequests@adams.wa.gov">ServiceRequests@adams.wa.gov</a>]</td>
</tr>
<tr>
<td>Island, San Juan, Skagit, Snohomish, Whatcom</td>
<td>(800) 567-5582  [<a href="mailto:ServiceRequests@island.wa.gov">ServiceRequests@island.wa.gov</a>]</td>
</tr>
<tr>
<td>King, Kitsap, Pierce</td>
<td>(800) 974-4428  [<a href="mailto:ServiceRequests@king.wa.gov">ServiceRequests@king.wa.gov</a>]</td>
</tr>
<tr>
<td>Clark, Cowlitz, Grays, Island, Jefferson, Lewis, Mason, Pacific, Skamania, Thurston, Wahkiakum</td>
<td>(888) 707-1202  [<a href="mailto:ServiceRequests@clark.wa.gov">ServiceRequests@clark.wa.gov</a>]</td>
</tr>
</tbody>
</table>
Waiver Overview
Department of Social and Health Services’ Developmental Disabilities Administration has five Home and Community-Based Service Medicaid Waiver programs. Each waiver offers specific services to meet health and safety needs in the community. The Core waiver offers a variety of services when not available through other resources (private insurance, Medicaid, school, etc.)

Core waiver offers residential options to individuals at immediate risk of institutional placement or have an identified health and welfare need for services that cannot be met by the Basic Plus/Waiver, Age 0-4.

If the assessed need for services exceeds the scope of service provided under the Core waiver, DDA will make one or more of the following efforts to meet health and welfare needs:

- Identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the Core waiver other than natural supports;
- Offer an application for an alternative waiver that has services needed;
- Offer placement in an Intermediate Care Facility for Individuals with Intellectual Disabilities.

If none of the above options meet the health and welfare needs, DDA may terminate waiver eligibility. If terminated from a waiver, an individual may still be eligible for other non-waiver DDA services.

Waiver Services
Use this brochure to plan annual assessments. A case resource manager will explain services and requirements, and document services selected in the person-centered service plan. Some services require prior review and approval. Services in four categories with age limits include:

- Community Services – promote client participation and integration in the community
- Professional Services – support services provided by contracted professionals
- Caregiving Services – supports for participants and their caregivers
- Goods and Services – equipment, supplies and specialized services for participants

Community Services
- Community engagement – supports to increase connections and engagement in community resources.
- Community inclusion – individualized support services that connect people in the local community to build relationships with others who share similar interests.
- Residential habilitation – assistance for learning, improving, or retaining skills necessary for living in the community.
- Supported employment – intensive, ongoing individual and group support to obtain and sustain employment. 21+
- Transportation – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCSR

Professional Services
- Stabilization services – activities that assist one during a behavioral health crisis, includes specialized habilitation, staff/family consultation and crisis diversion bed services.
- Specialized habilitation – individualized support to learn or maintain a range of life skills.
- Positive behavior support and consultation – supports that assess and address behavioral health needs. These include interventions to promote behaviors that improve quality of life and inclusion in the community. 0-20

- Risk assessment – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.
- Staff/family consultation – professional consultation for family and direct service providers to better meet needs of individual.
- Therapies – occupational, physical and speech, language and hearing services beyond those provided by Medicaid (Apple Health). 21+

Caregiving Services
- Respite – short-term relief to individuals who live with and care for persons with disabilities
- Skilled nursing – chronic, long-term, nursing services to address needs not met through Medicaid (Apple Care), 21+

Goods and Services
- Bed bug extermination – Treatment for bed bugs in the home.
- Environmental adaptations – physical modification to a home necessary for one to continue living in the community.
- Specialized equipment and supplies – necessary equipment and supplies not available under Medicaid (Apple Care) including items needed to implement therapeutic or positive behavioral support plan.
- Wellness education – monthly, individualized, printed, educational material designed to assist in managing health-related issues and achieving wellness goals.
Community Protection Waiver Overview

The Community Protection waiver offers residential supports for up to 433 individuals who are at least 18 years of age and meet the criteria for DDA the Community Protection Program. Individuals have been assessed to require 24-hour, on-site staff supervision to ensure the safety of themselves and others. The individual must agree to the Community Protection Individual Support Plan. An individual may request to be enrolled on a waiver or to be enrolled in a different waiver at any time. Waiver enrollment is based upon funding and capacity.

Services Include

- Assistive Technology
- Community Transition
- Environmental Adaptations
- Extermination of Bed Bugs
- Individual/Group Supported Employment
- Individualized Technical Assistance
- Occupational, Speech and Physical Therapies (for adults, when not covered under state plan benefits)
- Positive Behavior Support and Consultation (over age 21)
- Residential Habilitation
- Risk Assessment
- Skilled Nursing (over age 21)
- Specialized Equipment and Supplies
- Stabilization Services-Specialized Habilitation
- Stabilization Services-Staff and Family Consultation
- Stabilization Services-Crisis Diversion Bed
- Staff and Family Consultation
- Transportation

Waivers are limited to the average cost of an Intermediate Care Facility for Individuals with Intellectual Disabilities for any combination of services necessary to meet the assessed client need. The Department cannot deny services to people on the waiver due to lack of funding. Consequently, DDA carefully monitors waiver expenditures.

Eligibility Requirements

- Have been determined to be an eligible client by the Developmental Disabilities Administration
- Meet Social Security Disability criteria
- Meet Institutional Level of Care (ICF/IID) criteria
- Meet the income and resource standards for Apple Health of Washington. (Client’s income and resources, not family unit’s income and resources)
- Are a U.S. citizen or federally qualified legal resident
- Accept home and community-based services as an alternative to institutional services.
- Community Protection waiver participants must also meet Community Protection Program criteria in WAC 388-831-0030
Authority

- Title XIX federal funding through §1915(c) Home and Community Based Services waiver and state funding
- Chapter 388-845 WAC, DDA Home and Community Based Services Waivers

Rates

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Service rates can be found at: https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management

Partners

- Individuals receiving services
- Families of program participants
- Health Care Authority
- Department of Children, Youth and Families
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Counties and service providers
- Washington State Developmental Disabilities Council

Oversight

External

- ALTSA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- State Auditor’s Office
- Washington State Department of Health

Internal

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit

Information Contact

Ann Vasilev
Waiver Services Unit Manager
Ann.vasilev@dshs.wa.gov
360-407-1551

DDA website https://www.dshs.wa.gov/dcia/
Waiver Eligibility
Recipients must meet all of the following criteria:

- Be an eligible client of DDA per RCW 71A.10.003(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
  - If a child, parent’s income and resources are not considered.
  - If an adult living with a spouse, the spouse’s income and resources are not considered.
- Have resources less than $2,000 or be in the Apple Health for Workers with Disabilities (HWD) program.
- Meets the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) as determined by the DDA assessment.
- A Person-Centered Service Plan (PCSP) shows how health, safety, and habilitation needs can be met in the community with a monthly waiver service and/or monthly monitoring.
- Agree to accept home and community-based services rather than an ICF/IID.
- For Community Protection only, one must also be age 18 or older, and
  - Meet eligibility criteria in WAC 388-831-0030.

Access to a Waiver
A person may request enrollment on a waiver or a different waiver at any time. Ask a Case/Resource Manager (CRM). If a person does not have a CRM, contact a local No-Paid Service line listed under Regional Offices or submit the request online at www.dshs.wa.gov/dda/service-and-information-request.

Meeting service criteria for the waiver does not guarantee access to waiver services. Each waiver is limited on the number of people who can be served. DDA has the authority to limit enrollment based on the availability of funding for new waiver participants.

Administrative Hearing Rights
All individuals have the right to an administrative hearing with the following decisions regardless of program or service:

- DDA eligibility is denied, terminated, or DDA unreasonably delayed acting on application;
- Type or amount of service authorized;
- Denial, reduction, or service terminations;
- Denial of choice of service provider;
- If a person is moved to a different residential setting, not of their choice;
- DDA refusal to abide by a request not to send notices to any other person;
- Disenrollment from a waiver program;
- Denial of a request to receive ICF/IID services instead of waiver services;
- DDA determines the services available on a person's current waiver can meet health and welfare needs and they disagree;
- A person is assessed to not need ICF/IID level of care;
- An individual is assessed to not meet CIIBS eligibility.

Visit us online at: dshs.wa.gov/dda/service-and-information-request
Find an office at: dshs.wa.gov/office-locations

Call us:

<table>
<thead>
<tr>
<th>Counties</th>
<th>Phone and Email</th>
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</thead>
<tbody>
<tr>
<td>Chelan, Douglas, Ferry, Grant, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens</td>
<td>(888) 311-7116 <a href="mailto:RIServicedRequest@kshs.wa.gov">RIServicedRequest@kshs.wa.gov</a></td>
</tr>
<tr>
<td>Adams, Okanogan, Benton, Colfax, Franklin, Garfield, Klickitat, Walla Walla, Whitman, Yakima</td>
<td>(866) 715-3646 <a href="mailto:RIServicedRequest@kshs.wa.gov">RIServicedRequest@kshs.wa.gov</a></td>
</tr>
<tr>
<td>Island, San Juan, Skagit, Snohomish, Whatcom</td>
<td>(800) 567-5832 <a href="mailto:RIServicedRequest@kshs.wa.gov">RIServicedRequest@kshs.wa.gov</a></td>
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<tr>
<td>King</td>
<td>(800) 974-4428 <a href="mailto:RIServicedRequest@kshs.wa.gov">RIServicedRequest@kshs.wa.gov</a></td>
</tr>
<tr>
<td>Kittitas, Pierce, Clark, Cowlitz, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Skamania, Thurston, Whatcom</td>
<td>(888) 707-1202 <a href="mailto:RIServicedRequest@kshs.wa.gov">RIServicedRequest@kshs.wa.gov</a></td>
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</tbody>
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Support hearing support with hearing or communication assistance at the Washington Department of Social and Health Services

Resources:

- Transforming Lives
- DHSE 22-1787 (Rev 12/18)
Waiver Overview
Washington State's Developmental Disabilities Administration (DDA) offers five Home and Community-Based Service (HCBS) Medicaid Waiver programs. Each waiver offers specific services to meet individual health and safety needs in the community, rather than in an institution. The Community Protection waiver offers a variety of services when they are not available elsewhere (private insurance, Medicaid, school, etc.).

Community Protection (CP) Waiver offers therapeutic residential supports for individuals assessed to require 24-hour, on-site staff supervision to ensure the safety of others. Participants voluntarily agree to follow the Community Protection guidelines. Individuals served are age 18 and older.

If an individual's assessed need for services exceeds services provided under the CP waiver, DDA will make one or more of the following efforts to meet health and welfare needs:
- Identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the CP waiver other than natural supports;
- Provide the opportunity to apply for an alternative waiver with the services needed;
- Offer placement in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

If none of the above options meet the health and welfare needs, DDA may terminate waiver eligibility if terminated from a waiver, persons may still be eligible for other non-waiver DDA services.

Waiver Services
Use this brochure to plan for annual assessments. A Case Resource Manager (CRM) will explain services and requirements, and document services selected in the Person-Centered Service Plan (PCSP). Some services require review and approval. A CRM knows what information is needed for prior approval. Services in four categories with waiver age limits include:

- Community services – promote client participation in the community
- Professional services – supports provided by contracted professionals
- Caregiving services – supports for participants and their caregivers
- Goods and services – equipment, supplies, and specialized services for participants

Use check boxes to show the CRM which services are of interest:

Community Services
- Residential habilitation – assistance to learn, improve, or retain the social skills necessary for living in the community
- Supported employment – intensive, ongoing support to obtain and sustain employment
- Transportation – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCSP

Professional Services
- Behavioral health stabilization services – services to assist when someone experiences a behavioral health crisis. This includes positive behavior support and consultation, specialized psychiatric services and crisis diversion bed services.
- Behavioral health stabilization services – crisis diversion bed services – temporary residential and behavioral services for persons at risk of mental-fucling decline and psychiatric hospitalization.
- Positive behavior support and consultation – supports that address behavioral health needs. These include direct interventions to promote behaviors that improve quality of life and inclusion in the community
- Risk assessment – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services
- Specialized Psychiatric Services – Psychiatric services specific to the needs of individuals with a developmental disability
- Staff/family consultation and training – professional training and consultation to family and direct service providers to better meet an individual need
- Therapies – occupational, physical and speech, language and hearing services beyond those provided by Medicaid (Apple Health)

Caregiving Services
- Skilled nursing – Chronic, long-term, nursing service to address needs not met through Medicaid (Apple Care)

Goods and Services
- Bed bug extermination – Treatment for bed bugs in the home.
- Environmental adaptations – physical modification to the home necessary for a person to continue living in the community.
- Specialized medical equipment and supplies – medically-necessary equipment and supplies not available under Medicaid (Apple Care)
Peer Mentoring

Peer mentoring takes place between a person who has lived through a specific experience (mentor) and a person who is new to that experience (mentee).

In the Developmental Disabilities Administration, peer mentoring provides support to clients and their families in locating and accessing community services.

This service is available to participants enrolled on the Individual and Family Services waiver.

Peer Mentors:

• Meet and discuss goals in the person-centered service plan developed by you and your case manager.
• Help you develop specific goals related to engaging with the community.
• Share successful experiences to navigate community resources beyond those offered through DDA waiver services.
• Develop, with the client and family, strategies to navigate new experiences and connect the client with community resources based on their interests and needs.

The Department of Social and Health Services assists more than 35,000 clients through the Developmental Disabilities Administration. As part of our mission of transforming lives, we need people to serve in the role of Peer Mentor provider.

www.dshs.wa.gov/dda/developmental-disabilities-administration-contracts

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Through a commitment to social justice and respectful, person-centered practices, we partner with individuals who live in institutional settings to utilize their power and choice.

www.dshs.wa.gov/dda
**Specialized Habilitation**

Specialized Habilitation includes individualized and community-based supports that help waiver participants reach their habilitative goals. It also promotes inclusion in DDA clients’ home and community as documented in their person-centered service plan. Specialized Habilitation offers training in the following areas:

- Self-empowerment
- Safety awareness and self-advocacy
- Interpersonal and effective communication
- Coping strategies regarding typical life challenges
- Managing daily tasks and acquiring adaptive skills

Specialized Habilitation is limited to a waiver participant’s annual budget. For individuals on the Basic Plus and CORE waivers (non-residential) the limit is $4,000 of their total funds. Individuals on the CIIBS waiver are limited to their CIIBS package. Clients on the IFS waiver are limited to their annual allocation amount. Specialized Habilitation services are not included in client benefits available through Early and Periodic Screening Diagnostic and Treatment, Medicaid State Plan benefits, or other community resources.

Specialized Habilitation services not provided as a stabilization service require prior approval by the DDA regional administrator or designee.

Specialized Habilitation may not be authorized when habilitation supports are received through Residential Habilitation.

The Department of Social and Health Services assists more than 32,000 clients through the Developmental Disabilities Administration. As part of our mission to transform lives, we need people to serve as Specialized Habilitation providers. [www.dshs.wa.gov](http://www.dshs.wa.gov)

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Washington State Department of Social and Health Services