Self-Empowered Life Funding (SELF) waiver

**CHANGES** TO Ohio’s First Self-Directed Home AND Community based services (HCBS) Medicaid Waiver

**OAC: 5123-9-40**
Agenda

• What’s new with the SELF waiver?
• Eligibility
• Budgets
• Updated Definitions
• Updates to Budget Authority/Employer Authority
• Financial Management Services Entity
• Changes to Participant-Directed Goods and Services
• New Services
  • Self-Directed Transportation
  • Home-Delivered Meals
  • Service List
What’s new with the SELF Waiver?

- New Services
  - Home-Delivered Meals
  - Self-Directed Transportation
- Prescreening tool no longer needs to be completed.
- Language revisions shift focus away from “least expensive”.
- Language revisions move the focus to the habilitative intent of Home and Community Based Services (HCBS) waiver services and away from “medical necessity”.
- Rates Increased
  - Waiver Nursing Delegation
  - Clinical/Therapeutic Intervention.
Eligibility for the SELF Waiver

- The SELF Waiver is for people with developmental disabilities who...
  - are eligible for Medicaid (county board can support applicants with this process),
  - have a developmental disabilities level of care,
  - need at least one SELF Waiver service,
  - can be healthy and safe while using the SELF Waiver (OAC 5123-9-01),
  - and are able to manage money in a budget, manage their support staff for at least one waiver service, or can choose someone to do these things for them. (OAC 5123-9-40)
- There is no age requirement.
- Unlike the Level One and Individual Options waivers, the SELF Waiver requires the person enrolled in the waiver or someone they choose to direct at least one of their services.
BUDGETS

- **Adult** budgets up to $45,000 per waiver span.
- Adult means a person who is at least 22 years old OR a person who is no longer eligible for educational services based on graduation, receipt of diploma or equivalency certificate, or permanent discontinuation of educational services.

- **Child** budgets up to $30,000 per waiver span.
- Child means a person who is under 22 years old and eligible for educational services.

Support Brokerage cannot exceed $8,000 per waiver span
Assistive Technology cannot exceed $5,000 per waiver span
Functional Behavioral Assessment cannot exceed one assessment for up to $1,500 per waiver span
Participant-Directed Goods and Services (PDGS) purchases for environmental accessibility projects over $10,000 must be reviewed by DODD
Budget Authority

Definition:
The person has the authority and responsibility to manage their budget for participant-directed services. This authority supports the person in determining the budgeted dollar amount for each participant-directed waiver service that will be provided to them and making decisions about the acquisition of participant-directed waiver services that are authorized in the individual service plan.

Example: negotiating payment rates to providers within applicable range as specified in rule.

Budget Authority can be used for the following services:
- Clinical/Therapeutic Intervention
- Participant-Directed Good & Services
- Participant-Directed Homemaker/Personal Care
- Support Brokerage
- Self-Directed Transportation
EMPLOYER AUTHORITY

Definition:
A person has the authority to recruit, hire, supervise, and direct staff who provide supports. The person will act as the common law employer or the co-employer of staff.

Employer Authority can be used for the following services:
• Participant-Directed Homemaker/Personal Care
• Self-Directed Transportation
• Support Broker
2 Types of Employer authority
Common Law Employer & Co-employer

Common Law Employer- a person is legally responsible, and the liable employer of staff selected by the person. The person hires, supervises, and discharges staff. The person is liable for the performance of employment-related tasks and uses a Financial Management Service entity (FMS) to perform payroll and other employment tasks as the person's agent to ensure that the person's legal obligations are fulfilled.

Co-employer- a person who recruits and directs staff that are providing services to the person either as an agency with choice or a Financial Management Service entity (FMS) under contract with the state that functions as the employer of the staff recruited and directed by the person. The agency with choice or FMS serving as the co-employer may function solely to support the person's employment of workers or it may provide other employment supports to the person.
Financial Management Services Entity (FMS)

Definition:
A governmental entity and/or another third-party entity that is assigned by the DODD to perform necessary financial transactions on behalf of the person who has chosen participant-directed services.

- The FMS can provide services such as:
  - Paying Invoices,
  - Tracking Expenditures,
  - Operating a payroll service,
  - Making payroll withholdings, and/or
  - Act as the employer of the staff on behalf of the person under the co-employer model.
Participant-Directed Goods and Services (PDGS)

**OAC: 5123-9-45**

PDGS includes services, equipment, or supplies that are not provided through Medicaid State Plan services or another waiver service. PDGS does not require that equipment and services be provided by a Medicaid-certified provider.

The services, equipment, or supplies must be directly linked in the Individual Service Plan to a need clearly identified through assessment. The services, equipment, or supplies are required to:

- Decrease the need for other Medicaid home and community-based services;
- Advance participation in the community;
- Increase safety at home;
- Increase independence;
- Improve cognitive, social, or behavioral functions; **or**
- Assist to develop or maintain personal, social, or physical skills.

All PDGS items need to be identified/authorized in the Individual Service Plan (ISP).
Items Not Permitted:

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<th>Items</th>
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<td>Experimental treatments, including items considered by the federal food and drug administration as experimental or investigational or not approved to treat a specific condition.</td>
<td>New equipment/supplies or repair of previously approved equipment or supplies that have been damaged because of confirmed misuse, abuse, or negligence.</td>
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<td>Equipment, supplies, and devices of the same type for the same person, unless there is a documented change in the person’s condition that warrants the replacement.</td>
<td>Home modifications of general utility or that add to the total square footage of the home.</td>
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<td>Pools, spas, or saunas</td>
<td>Food, tobacco, or alcohol</td>
</tr>
<tr>
<td>Items used solely for entertainment or recreational purposes</td>
<td>Items that are illegal or otherwise prohibited through federal or state regulations</td>
</tr>
<tr>
<td>Internet service</td>
<td>Items of General Utility</td>
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Participant-Directed Goods and Services (PDGS)  
Review Requirements Updated

- County Boards are no longer required to have an “established cost-comparison process” and “Review Committee”

Instead

- County Boards will now have their own review process for PDGS purchases totaling $500 or more

- Certain items will continue to require DODD approval, such as, generators, fences, playsets, home modifications over $10,000, and items available through other waiver services, Medicaid State Plan/Healthcheck, and services that are the responsibility of the local school district in an Individual Education Plan (IEP).
Home-Delivered Meals added to SELF
OAC: 5123-9-29

This service provides meals that are prepared, packaged, and delivered to a person’s home to accommodate their dietary needs. These meals can be up to twice a day and now include kosher, therapeutic, and standard meals. Payment rates have been adjusted to allow for the different types of meals.

The type of meal will need to be included in the Individual Service Plan (ISP) and authorized through the Service & Support Administrator (SSA).

<table>
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<tr>
<th>Type</th>
<th>Rate</th>
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<tr>
<td>Standard meal</td>
<td>$7.20</td>
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<tr>
<td>Kosher meal</td>
<td>$8.68</td>
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<tr>
<td>Therapeutic meal</td>
<td>$8.68</td>
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Self-Directed Transportation enhances a person’s independence and is available around the clock, including weekends and holidays, to accommodate on-demand and scheduled transportation needs. This is intended to allow people the option to travel independently.

Self-Directed Transportation can be used in two ways:

- Purchase of prepaid vouchers, cards, passes, or tokens to access modes of ground public transportation (i.e., Uber, Lyft, buses, cabs, etc.).

- Use someone the person knows such as a family member, friend, or neighbor to transport. The person chosen will need to be approved through the Financial Management Service entity.
Who Can Benefit from self-directed transportation?

▪ People working in the community, especially when working late night or weekend shifts.

▪ People looking to be more involved in community activities, especially when those activities are in the evening, on weekends, or at times when transportation has not been typically as available.

▪ People looking for more community-based, or typically available transportation providers.

▪ People wanting to navigate the community independently, without the receiving another waiver service at the same time.

▪ People wanting to access transportation options that have been previously unavailable.
Who Can Provide self-directed transportation?

- **Self-Directed Transportation** shall be provided by:
  - A vendor of ground transportation available to the general public; or
  - Someone chosen by the person. The chosen provider will receive per mile or per trip reimbursement in accordance with a written agreement for provision of Self-Directed Transportation with the individual being transported. This provider must bill for services through the FMS entity and will be paid by the FMS entity.
  - An agency provider or independent provider certified by the department to provide Non-Medical Transportation or Transportation that agrees to provide Self-Directed Transportation in accordance with this rule. (OAC 5123-9-26)
SELF Waiver services

- Participant-Directed Homemaker/Personal Care
- Participant-Directed Goods and Services
- Participant/Family Stability Assistance
- Assistive Technology
- Remote Support
- Support Brokerage
- Transportation
  *Self-Directed Transportation - NEW*
  *Home-Delivered Meals – NEW*
- Waiver Nursing Delegation

- Adult Day Supports
- Community Respite
- Residential Respite
- Career Planning
- Clinical/Therapeutic Intervention
- Functional Behavioral Assessment
- Group Employment Support
- Individual Employment Support
- Non-Medical Transportation
- Vocational Habilitation
Additional Supports

Resources:
SELF Waiver Handbook
SELF Waiver Changes Handout
Self-Directed Transportation Handout
Home-Delivered Meals Handout
(Link to pages)

To find the newly amended rule click on the link:
OAC 5123-9-40

Questions about changes can be submitted to:
waiverpolicyta@dodd.ohio.gov