HCBS- Supported Living Services (SLS) Waiver

The HCBS-SLS Waiver provides services and supports to adults with developmental disabilities living in their own or family’s home and who do not require access to 24 hour supervision or if they do require extensive supervision, this is provided by un-paid supports.

This waiver is being amended to include a Consumer Directed Attended Support Service (CDASS) delivery option. CDASS is a service delivery option in which a participant can choose to direct and manage their attendants who provide Personal Care Services, Homemaker Services and Health Maintenance Activities rather than receiving those services through an agency. Participants are empowered to select, train and manage the attendants of their choice to best fit their unique needs or may delegate these responsibilities to an Authorized Representative (AR) of their choosing.

Individuals currently enrolled in the HCBS-SLS waiver receive a variety of services that support their ability to live in the community. Two of those services are Personal Care and Homemaker Services. Individuals enrolled in the HCBS-SLS waiver can also receive health services support as Home Health through the Medicaid State Plan. Under the proposed CDASS option, Home Health Services through the State Plan will be replaced with Health Maintenance through the HCBS-SLS waiver.

Expenditures for the HCBS-SLS are controlled to stay within the annual appropriation by upper payment limits set in Support Levels, which are specific to an individual’s needs, and the upper limit of the HCBS-SLS waiver, $45,500. Health Maintenance will be the only service that will be outside of the Support Level and outside of the upper limit of $45,500.

When a participant chooses CDASS they must choose to work with one of three Financial Management Services (FMS) agencies to make financial transactions on their behalf. The FMS handles the employment taxes, workers’ compensation, unemployment insurance, and other requirements associated with employing the attendant. The participant also has two options of FMS Employer Models, Agency with Choice Model (AwC) and Fiscal Employer Agent Model (F/EA). With the AwC, the client and the FMS are co-employers, with FMS as the common-law employer per the Internal Revenue Service (IRS). With F/EA, the client is the common-law employer per the IRS. The participant/AR will be trained by the Training and Operations vendor.
- Attachment #2: Home and Community Based Settings Waiver Transition Plan- Addition to comply with federal home and community based (HCBS) settings requirements at 42 CFR 441.301 (c.)(4)-(5), and associated CMS guidance.

- Appendix E: Participant Direction of Services - Added to allow the participant directed service delivery option.

- Appendix I: Financial Accountability – Amend to include how the Health Maintenance Activities was developed.

- Appendix J: Amend to adjust figures to improve the accuracy of projections.