


<b>CHAPTER</b> Service Delivery	<b>CHAPTER</b> 02	<b>SECTION</b> 004	<b>SUBJECT</b> 165
<b>SECTION</b> Clinical and Support Services		<b>DESCRIPTION</b> Children's Waiver Program	
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**APPLICATION:**

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input checked="" type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

**POLICY:**

Lapeer County Community Mental Health (LCCMH) uses the Children's Waiver Program (CWP) services for children with behavioral or medical and habilitative needs at home. The needs must be on a consistent daily basis and meet the requirements for the level of care for an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

**STANDARDS:**

- A. LCCMH utilizes the CWP as it relates to the health and safety of the child, factors that affect the family's capacity to provide care for the child at home, or the necessity of providing services to maintain the child in the least restrictive alternative to meet the child's needs.
- B. Eligibility Requirements:
  1. The child must be under the age of 18.
  2. The child must reside in Lapeer County.

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3. The child must meet or be below Medicaid income and asset limits when viewed as a family of one (the parent's income is waived).
  4. The child must have an intellectual/developmental disability as defined by Michigan State law. An intellectual/developmental disability is not based on diagnosis. Instead, an intellectual/developmental disability is based on documented evidence of "substantial functional limitations" in three or more of the following areas (considering the age of the child):
    - a. Self-care (bathing, grooming, dressing, toileting, eating)
    - b. Expressive and receptive language
    - c. Learning
    - d. Mobility
    - e. Self-direction
    - f. If a child is age 16 or older: capacity for economic self-sufficiency and independent living can be considered
  5. The child must have identified needs for a consistent, aggressive program of in-home services and supports focused on developing skills for the child to function with as much independence as possible and/or to prevent the loss of current abilities.
  6. The child must live with a birth or legally adoptive parent or with a relative who has been named the legal guardian by the court (and who IS NOT paid to provide foster care for the child).
  7. Other requirements and service descriptions can be found in the CWP section of the Medicaid Provider Manual.
- C. Exit Criteria for this program are as follows:
1. Child/adolescent is no longer a Lapeer County resident.

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2. There has been no activity or contact with the child/adolescent despite efforts to involve them for thirty days.
3. Child/adolescent no longer demonstrates chronic psychosis and/or debilitating mental illness and no longer requires treatment or medication to live normally within the community without risk of re-hospitalization.
4. Child no longer meets medical necessity for CWP Services.
5. Child and/or family meet IPOS goals and objectives.

**PROCEDURES:**

- A. For children not currently receiving LCCMH services, the family contacts the Region 10 Access Center at (888) 225-4447 to schedule an intake assessment.
- B. For children already receiving services through LCCMH, the family discusses an assessment for CWP with the child's primary case holder.
- C. An assessment is made by LCCMH children's department. The family discusses the following information during the assessment:
  1. The needs of the child
  2. The functional limitations of the child
  - 3.
  4. In-home help/services being requested
  5. Family Income
  6. Insurance Information
- D. Based on the assessment, a pre-screen may be submitted to the Michigan Department of Health and Human Services (MDHHS) online system by the assigned LCCMH staff person for scoring.
- E. Prescreens are scored using the Priority Weighing Criteria, developed and maintained by MDHHS.

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- F. After MDHHS completes the scoring and notifies LCCMH, the assigned LCCMH staff person contacts the family. The family can contact the staff person if there are questions.
- G. If significant changes occur in the child's needs or family situation, adjustments must be made to the screening and submitted to MDHHS.
- H. If the child/family is accepted for the CWP, an invitation to apply is issued to the family with the highest updated score meeting all requirements at the time.
  - 1. Medicaid status is checked before invitations to apply are issued.
  - 2. Once the family/child receives the invitation to apply, the family must then apply for the CWP.
- I. Once a child is accepted into the CWP, a supports coordinator/case manager is assigned and assesses the child to determine category of care based on MDHHS criteria.
- J. The supports coordinator/case manager develops the Individual Plan of Service (IPOS) with the family based on the determined needs. If the person served is in more than one program at LCCMH, the IPOS integrates all goals and objectives from multiple programs.
- K. The supports coordinator/case manager assures the family and all staff providing services to the child are trained in the goals of the IPOS prior to any services being provided. Training documentation is kept in the electronic health record of the person served. The following is documented with each training:
  - 1. Who gave the training
  - 2. Who attended
  - 3. Date of training
  - 4. Description of training covered
- L. The assigned supports coordinator/case manager maintains the record and is responsible for assessing, planning, linking, coordinating and monitoring needs of the child/adolescent.

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**REFERENCES/EXHIBITS:**

1. Michigan Medicaid Provider Manual (Section 14)
2. Priority Weighing Criteria - [https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder3/Folder12/Folder2/Folder112/Folder1/Folder212/Priority\\_Weighing\\_Criteria\\_Revised\\_121115.pdf?rev=3f94a1b113e7422c8f2a627b1127dfb2](https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder3/Folder12/Folder2/Folder112/Folder1/Folder212/Priority_Weighing_Criteria_Revised_121115.pdf?rev=3f94a1b113e7422c8f2a627b1127dfb2)

**Definitions:**

1. Priority Weight Criteria: All pre-screen forms are reviewed by Michigan Department of Health and Human Services (MDHHS) on the basis of the criteria listed below. Each element of the criteria is related to the health and safety of the child, factors which impact the family's capacity to provide for the child at home, or the necessity for provision of services to maintain the child in the least restrictive alternative in which the needs of the child can be met. The following criteria are listed in order of importance from most important, factor 10, to least important, factor 1. A score is given for each factor. The highest score for each factor is a (five) 5, the lowest a (one) 1. A total score for each factor is achieved by multiplying the importance factor by the rating for each criterion. The totals for each criterion are added together to give the child a total numeric score on which rank is determined.

MH & JB:lr