

MINNESOTA DEPARTMENT OF HUMAN SERVICES HOME AND COMMUNITY BASED SERVICES PROGRAMS

Home and Community Based Services Programs provide funding for services that are necessary for an individual to remain in the community and avoid being placed in an institution. The following is a summary of programs available in Minnesota.

Medical Assistance Funded Waiver Programs:

CADI: Community Alternatives for Disabled Individuals

TBIW: Traumatic Brain Injury Waiver NF: Nursing

facility level NB: Neurobehavioral hospital level

CAC: Community Alternative Care for Chronically III Individuals

MR/RC: Home and Community-Based Services for Persons with Mental Retardation or Related

Conditions

Authority: Omnibus Budget Reconciliation Act (OBRA) of 1981 (P.L. 97-35), section 2176. (Section

2176 added 1915(c) to the Social Security Act)

	10/1/87 10/1 - 9/30		/87 4/1/92		1/1/94 4/1 - 3/31		4/1/85 4/1 - 3/31		MR/RC 7/1/84 7/1 - 6/30	
Date Initiated										
Waiver Year										
Number of Possible Recipients	10/00 10/01 10/02	4525 5015 5449	4/00	442	4/00	140	4/00 4/01 4/02	0.777.53	7/00 7/01	8,939 9,416
Average Annual Cost per Person for Program Services	10/00 10/01 10/02	\$7,769 \$8,450 \$9,141		\$26,913	4/00	\$90,551	4/00 4/01 4/02	\$72,088 \$76,348 \$80,566	7/00 7/01	\$47,458 \$49,905

ELIGIBILITY CRITERIA	CADI	TBIW NF	TBIW NB	CAC	MR/RC
Under age 65	X	X	X	X	
Any age					X
Eligible for MA	X	X	X	Х	X
Certified as disabled	X	X	X	Х	
Diagnosed with an acquired brain injury which is not congenital or degenerative		х	х		
Experiencing significant behavioral and cognitive problems related to the injury		х		- 1	
Experiencing severe behavioral problems related to the injury		Programs.	x	-	Maria San
Diagnosed with mental retardation (MR) or a related condition (RC)		AND THE RE			х
Requires Nursing Facility (NF) level of care	Х	X			
Requires neurobehavioral hospital level of care	1100	() E.E.	х	1 200	011
Requires hospital level of care				x	
Requires Intermediate Care Facility for Persons with Mentally Retardation or Related Conditions (ICF/MR) level of care	/ COMPA	It sold his	MATE VILLE	T.	х
Has received a preadmission screening team assessment for home and community-based services	х	х			х
Has received an interdisciplinary or screening team assessment for home and community-based services	10-17		x	x	x
Chooses home and community based services	х	х	x	х	х
Health and safety in the community is ensured by plan of care	х	х	x	х	х
Program funding must not replace other sources of available funding	x	х	х	х	х
MA community costs are less than MA institutional costs per individual	х	х	х	х	
Average MA community costs are less than the average MA institutional costs					х

PROGRAM SERVICES	CADI	TBIW NF	TBIW NB	CAC	MR/RC
Case Management	Х	x	х	х	X
Case Management Aide (paraprofessional)	Х	х	х	х	
Consumer-Directed Community Supports					Х
Day Programs					
Adult Day Care	Х	х	х		x
Day Training and Habilitation					X
Prevocational Training	х	х	х		
Supported Employment	х	х	х		х
Structured Day Program		х	х		
In-Home Services					
Behavioral Programming		х	х		
Home Health Aide, Nursing (RN & LPN) *	х	X	х	х	
Home Health Therapies: OT, PT, Respiratory, Speech *	х	х	х	х	
In-Home Family Support					х
Live-in Personal Caregiver Expenses					х
Night Supervision		х	х		
Personal Care Assistant Services (PCA) *	х	х	х	х	Х
Companion Services		х	х		
Personal Support					х
Home Delivered Meals	х	х	х		
Nutrition Services *				х	
Homemaker Services	х	х	х	х	х
Chore Services		X	х		х
Independent Living Skills (ILS)					
ILS Training	х	х	х		
ILS Therapies: Recreation, Music, & Art		х	х		
Mental Health	10				
Cognitive Rehabilitation Therapy *	1347	х	х		
Psychological Testing / Explanation of Findings *		х	х		

PROGRAM SERVICES	CADI	TBIW NF	TBIW NB	CAC	MR/RC
Modifications and Adaptations					
To Home	X	х	х	х	х
To Vehicles	х	х	х	14	х
To Equipment	X				х
Prescribed Medications *				х	16
Residential Services					21
Assisted Living Services	x	х	х	7	70
Foster Care Services	х	х	X	х	
Housing Access Coordination					х
Residential Care Services	x	х	х		-
Supported Living Services (SLS)					х
Respite Care: In-Home and Out-of-Home	х	Х	X	х	X
Crisis Respite					х
Specialist Service					X
Supplies and Equipment *	X	Х	X	х	
Assistive Technology					х
Training and Support					
Caregiver Training and Education					х
Consumer Training and Education				*	х
Family Counseling and Training	х	х	х	х	
In-Home Family Support					Х
Transportation *		х	х	х	X
24-Hour Emergency Assistance					X

^{*} Recipients of waivers are eligible to receive all Medical Assistance State Plan services. Services listed above and followed by an asterisk (*) are "extended" waiver services - they are available as State Plan services but with limitations. These services must first be accessed through the State Plan to the extent of the limitations; any services above those limits may be billed as extended waiver services.