## What is the I/DD Medicaid Waiver?

Similar to other 1915(c) Medicaid waivers, the I/DD Medicaid waiver, allows the State of Alaska to offer a choice between home and communitybased services and institutional care for people who meet waiver service criteria.

The I/DD waiver specifically serves participants under the following 5 qualifying diagnoses:

- 1) Intellectual Disability
- 2) Other Intellectual Disability Related Condition
- 3) Cerebral Palsy
- 4) Epilepsy
- 5) Autism

Possible services available for select persons on the I/DD Waiver include:

- respite care
- community inclusion supports
- residential supported-living
- nursing oversight
- care coordination
- and various other services

Intellectual and Developmental Disabilities (I/DD) Medicaid Waiver



Anchorage Office: 550 W 8th Ave Anchorage, AK 99501 Tel: (907)-269-3666 Fax: (907) 269-3639 Toll Free: 1-800-478-9996

## Fairbanks Office: 751 Old Richardson Highway, Suite 100-A Fairbanks, AK 99701 Tel: (907) 451-5045 Fax: (907) 451-5046 Toll Free: 1-800-770-1672

Website: http://dhss.alaska.gov/dsds/Pages /dd/default.aspx



Alaska Department of Health and Social Services

# Intellectual and Developmental Disabilities (I/DD)

### VISION:

"Choice, safety, independence and dignity in home and community-based living."

#### Senior and Disabilities Services

I/DD Unit

## I/DD Waiver Steps:

#### <u>STEP 1:</u> Developmental Disability Eligibility Application

Developmental disability (DD): a severe, chronic disability that: is attributable to a mental/physical impairment; is manifested before age 22; is likely to continue indefinitely; results in substantial functional limitations in three or more of the following areas of major life activity: self care; receptive and expressive language; learning; mobility; self direction; capacity for independent living; economic self-sufficiency.

Submit DD Eligibility application with appropriate signed supportive documentation to SDS.

#### Application Link:

http://dhss.alaska.qov/dsds/Document s/dd/DD-eligibility-application.pdf

#### **Application Instructions Link:**

http://dhss.alaska.gov/dsds/Document s/dd/DD-eligibility-applicationinstructions.pdf

\*Note: A Short-Term Assistance Referral (STAR) representative can assist you with this application process free of charge. Link to STAR Roster: http://dhss.alaska.gov/dsds/Document s/grantservices/PDFs/STAR\_Roster.pdf

Await DD Eligibility determination from SDS.

If DD Eligibility is approved, you can proceed to Step #2.

#### **STEP 2:** Choice Options

A) Path Towards Grants: With a DD Eligibility Approval letter, you can pursue applicable DD grant opportunities to meet more immediate needs.

DD Grants Program Link: http://dhss.alaska.gov/dsds/Pages/grants ervices/cddgp.aspx

\*Note: A Short-Term Assistance Referral (STAR) representative can assist you with this grants process free of charge.

#### Link to STAR Roster:

http://dhss.alaska.gov/dsds/Documents/grant services/PDFs/STAR\_Roster.pdf

**B)** Path Towards I/DD Waiver: Fill out and submit the Development Disabilities Registration and Review (DDRR).

#### DDRR Link:

https://www.partners.hss.state.ak.us/dsd s/ddwaitinglist/

\*Note: A Short-Term Assistance Referral (STAR) representative can assist you with this DDRR process free of charge. Link to STAR Roster:

http://dhss.alaska.gov/dsds/Documents/grant services/PDFs/STAR\_Roster.pdf

SDS scores the DDRR to determine service score which puts the participant in the proper order (by need) on the I/DD Registry.

Note: the DDRR should be updated annually and can be updated at any time such as the participant's situation changing (i.e. address change, increased behaviors, loss of primary care giver, etc.).

Note: You can choose option A or B above, neither of the options, or both options A & B.

#### STEP 3: I/DD Waiver

When a participant is drawn from the I/DD Registry based on their DDRR service score, a certified letter will be mailed detailing the opportunity to pursue I/DD Waiver services. A Care Coordination Agency list will be enclosed, broken out by geographic region and waiver type served, from which to choose a care coordinator.

#### Care Coordination Agency List Link:

http://dhss.alaska.gov/dsds/Documents /docs/services-providerlist.pdf

Upon receiving this waiver selection letter, you can choose to decline services or pursue services.

If you choose to pursue I/DD waiver services, please complete the following in order:

A. Return self addressed stamped care coordination postcard to SDS denoting **both** the care coordination agency and individual care coordinator being chosen. \* Note: this postcard has a box to check and return to SDS if you are declining waiver services.

**B**. Work with newly designated care coordinator to develop the initial level of care (LOC) packet. Submit this packet to SDS. If the LOC is approved and issued, proceed to C.

**C.** Work with the care coordinator to develop an initial plan of care (POC). Submit to SDS for determination.

*Note: The LOC & POC processes are annual.*