

# Department of Health & Senior Services (DHSS) – Division of Senior & Disability Services (DSDS) and Division of Community & Public Health (DCPH) Home & Community Based Services (HCBS) Guide

DHSS-DSDS administers six 1915(c) Home & Community Based Medicaid Waiver programs and state-plan in-home services for **children and adults with disabilities**. DHSS-DCPH administers one 1915(c) Medicaid Waiver program for **individuals living with HIV/AIDS**. Medicaid Waivers are awarded based on availability of slots, allocation, the individuals assessed level of need and date of service request.

		DSDS Home & Community Based Services (HCBS)			DSDS Special Health Care Needs (SHCN)		
ELIGIBILITY	Agency Model In-Home Services (IHS)	Consumer Directed Services (CDS)	Adult Day Care Waiver (ADCW)	Medically Fragile Adult Waiver (MFAW)	Healthy Children and Youth (HCY) Program		
	SERVICES	<ul style="list-style-type: none"> <li>Personal Care Aide</li> <li>Advanced Personal Care</li> <li>Authorized Nurse Visits</li> </ul>		<ul style="list-style-type: none"> <li>Personal Care Aide</li> <li>Advanced Personal Care</li> <li>Clean/Maintain Equipment</li> <li>Essential Transportation</li> <li>Essential Correspondence</li> </ul>	<ul style="list-style-type: none"> <li>Adult Day Service: Leisure time and exercise activities, counseling services, rehabilitative services, activities of daily living, medication management and nursing services, meals, transportation to and from the adult day care setting</li> </ul>	<ul style="list-style-type: none"> <li>Service Coordination</li> <li>Private Duty Nursing</li> <li>Advanced Personal Care</li> <li>Personal Care Aide</li> <li>Authorized Nurse Visits</li> <li>Specialized Medical Supplies</li> </ul>	<ul style="list-style-type: none"> <li>Service Coordination</li> <li>Private Duty Nursing</li> <li>Advanced Personal Care</li> <li>Personal Care Aide</li> <li>Authorized Nurse Visits</li> <li>Skilled Nursing Visits</li> </ul>
		DSDS Home & Community Based Services (HCBS)		DSDS Home & Community Based Services (HCBS)			DCPH
ELIGIBILITY	Aged & Disabled Waiver (ADW)	Structured Family Caregiving Waiver (SFCW)	Independent Living Waiver (ILW)	Brain Injury Waiver (BIW)	AIDS Waiver		
	<ul style="list-style-type: none"> <li>Missouri resident</li> <li>Active Medicaid (<b>not</b> Managed Care)</li> <li>Appropriate Medicaid Eligibility code</li> <li>Assessed to meet Nursing Facility LOC</li> <li>Cannot be enrolled in another waiver</li> </ul>						
SERVICES	<ul style="list-style-type: none"> <li>Age 63 - 64 with a disability or</li> <li>Age 65 and older</li> </ul>	<ul style="list-style-type: none"> <li>Age 21 or older</li> <li>Alzheimer's or related disorder diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>Age 18 - 64 (Able to remain enrolled after age 64 as long as ability to self-direct care is maintained)</li> <li>Cognitive or physical disability</li> </ul>	<ul style="list-style-type: none"> <li>Age 21 - 65</li> <li>Traumatic Brain Injury (TBI) diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>Age 21 and older</li> <li>HIV/AIDS diagnosis</li> <li>Enrolled in the Ryan White Medical Case Management System</li> </ul>		
	<ul style="list-style-type: none"> <li>Homemaker</li> <li>Chore Services</li> <li>Respite</li> <li>Home Delivered Meals</li> <li>Adult Day Care</li> </ul>	<ul style="list-style-type: none"> <li>Structured Family Caregiving Service in which a live-in caregiver assists with all daily needs. This may include tasks associated with:                             <ul style="list-style-type: none"> <li>Homemaker</li> <li>Attendant care</li> <li>Medication oversight</li> <li>Transportation services</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Additional CDS Personal Care</li> <li>Financial Management Services</li> <li>Case Management</li> <li>Environmental Accessibility Adaptations</li> <li>Specialized Medical Equipment</li> <li>Specialized Medical Supplies</li> </ul>	<ul style="list-style-type: none"> <li>Service Coordination</li> <li>Personal Care Aide</li> <li>Applied Behavioral Analysis</li> <li>Assistive Technology</li> <li>Cognitive Rehabilitation Therapy</li> <li>Environmental Access and Modification</li> <li>Neuropsychological Evaluation</li> <li>Occupational Therapy</li> <li>Physical Therapy</li> <li>Speech Therapy</li> </ul>	<ul style="list-style-type: none"> <li>Basic Personal Care</li> <li>Advanced Personal Care</li> <li>Authorized Nurse Visits</li> <li>Attendant Care Services</li> <li>DME Supplies</li> </ul>		

# Division of Senior & Disability Services and Division of Community & Public Health

## HCBS Referral and Resource Information

### DSDS – Home & Community Based Services

#### DSDS HCBS Referral Information

- HCBS Call Center: 866-535-3505 (8:30am - 3:00pm Monday - Friday, closed all weekends and holidays)
- [HCBS Referrals Webpage](#)
- HCBS Providers can submit new referrals using the [Online Home & Community Based Services Referral Form](#) OR send a [HCBS-1 Form](#) to [HCBSCallCenterReferrals@health.mo.gov](mailto:HCBSCallCenterReferrals@health.mo.gov).
- Participants, family, friends, or informal supports can submit new referrals by phone at **866-835-3505**, using the [Online Home & Community Based Services Referral Form](#), or by sending an [HCBS-1 Form](#) to [HCBSCallCenterReferrals@health.mo.gov](mailto:HCBSCallCenterReferrals@health.mo.gov).
- The phone line is reserved for participants and their supports only. This is an effort to ensure accessibility to participants, whom may not have other means to contact DSDS.**

#### DSDS HCBS Resource Information

- [DSDS-HCBS Webpage](#)
- [DSDS-HCBS Services Manual](#)
- Contact us with questions at: [LTSS@health.mo.gov](mailto:LTSS@health.mo.gov)

#### DSDS HCBS – Brain Injury Waiver Referral Information

- Phone: 573-751-6246 or Toll-free: 800-451-0669
- Submit BIW referrals to the following: [Waivers.LTSS@health.mo.gov](mailto:Waivers.LTSS@health.mo.gov)

### DSDS – Special Health Care Needs

#### DSDS SHCN Referral Information

- SHCN Central Office: 573-751-6246 (8:00am - 5:00pm Monday - Friday, closed all weekends and holidays)
- To complete a HCY or MFAW referral, you may either email [SHCNEastRegionReporting@health.mo.gov](mailto:SHCNEastRegionReporting@health.mo.gov)/[SHCNWestRegionReporting@health.mo.gov](mailto:SHCNWestRegionReporting@health.mo.gov) OR call the office in your designated Region on the [HCY/MFAW Regional Map](#)

#### DSDS SHCN Resource Information

- [SHCN Webpage](#)
- [HCY Fact Sheet](#)
- [MFAW Fact Sheet](#)

### DCPH – AIDS Waiver

#### DCPH AIDS Waiver Referral Information

- State Plan Personal Care (SPPC) AIDS Waiver Liaison: 573-751-6107
- To complete a referral, you must go through a Ryan White Medical Case Manager

#### AIDS Waiver Resource Information

- [HIV/AIDS Case Management Program](#)
- [HIV Case Management Regions and Agencies](#)

### DHSS – HCBS Medicaid Eligibility Information

Prior to completing any type of DHSS HCBS referral, **please ensure Medicaid status is verified for the individual. The individual must have active Medicaid fee-for-service to meet eligibility requirements. DHSS HCBS services do NOT cover services through any Managed Care plans.** If the individual you are assisting has Managed Care, please use the below information to redirect them to their [Managed Care Health Plan](#).

Home State Health	<ul style="list-style-type: none"> <li>1-855-694-4663</li> <li><a href="http://www.homestatehealth.com">www.homestatehealth.com</a></li> </ul>
Healthy Blue	<ul style="list-style-type: none"> <li>1-833-388-1407</li> <li><a href="http://www.healthybluemo.com">www.healthybluemo.com</a></li> </ul>
United Healthcare	<ul style="list-style-type: none"> <li>1-866-292-0359</li> <li><a href="http://www.uhc.com">www.uhc.com</a></li> </ul>
Show Me Healthy Kids	<ul style="list-style-type: none"> <li>1-877-236-1020</li> <li><a href="http://www.homestatehealth.com/showmehealthykids">www.homestatehealth.com/showmehealthykids</a></li> </ul>

# Department of Mental Health (DMH) – Division of Developmental Disabilities (DD)

DMH-DD administers four 1915(c) Home & Community Based Medicaid Waiver programs for **individuals with intellectual disabilities (ID) or other developmental disabilities**. Medicaid Waivers are awarded based on availability of Medicaid Waiver slots, allocation, the individuals assessed level of need and date of service request. Individuals can only be enrolled in one HCBS waiver.

	Comprehensive Waiver	Community Support Waiver	Partnership for Hope Waiver	MO Children's with Developmental Disabilities Waiver (MOCDD)
<b>ELIGIBILITY</b>	The Division of DD provides eligibility determination, information services, case management support and monitors for contract compliance ensuring that individuals with developmental disabilities have quality opportunities and choices to be fully included in the community.			
	<ul style="list-style-type: none"> <li>• Eligible for MO HealthNet (Missouri's Medicaid program) as determined by the Missouri Department of Social Services' Family Support Division under an eligibility category that provides for Federal Financial Participation</li> <li>• Have needs that would require care in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)</li> <li>• Have active ongoing habilitation needs</li> </ul>			<ul style="list-style-type: none"> <li>• Under the age of 18</li> <li>• Ineligible for MO HealthNet due to the deeming of parental income and resources</li> <li>• Live with family</li> <li>• Be eligible to receive waiver services</li> <li>• Have an ongoing waiver habilitative service need</li> </ul>
	<ul style="list-style-type: none"> <li>• Individual requires residential supports</li> </ul>	<ul style="list-style-type: none"> <li>• Service needs are limited to \$40,000 annually and the individual must <b>not</b> require residential services (this limit may be exceeded on a case-by-case basis)</li> </ul>	<ul style="list-style-type: none"> <li>• Must live in a participating county of the Partnership for Hope Waiver</li> <li>• Meets the prioritization of need established for this waiver</li> <li>• Service needs are limited to \$12,362 annually &amp; the individual must not require residential services (If there are special circumstances, individuals may be able to get more services up to a maximum of \$15,000)</li> </ul>	
	Comprehensive Waiver	Community Support Waiver	Partnership for Hope Waiver	MOCDD Waiver
<b>WAIVER SERVICES</b>	<ul style="list-style-type: none"> <li>• Applied Behavior Analysis • Assistive Technology • Community Networking • Community Specialist (allows self-directed option) • Crisis Intervention</li> <li>• Day Habilitation • Environmental Accessibility Adaptations (home/vehicle modifications) • Health Assessment &amp; Coordination Services</li> <li>• Individual Directed Goods &amp; Services (self-directed only) • Individualized Skill Development • Personal Assistant (allows self-directed option) • Remote Supports</li> <li>• Specialized Medical Equipment and Supplies (Adaptive Equipment) • Support Broker (self-directed only) • Transportation</li> </ul>			
	X	X	X	X
	<ul style="list-style-type: none"> <li>• Benefits Planning • Career Planning • Community Transition • Job Development • Occupational Therapy • Physical Therapy</li> <li>• Prevocational Services • Professional Assessment and Monitoring • Speech Therapy • Supported Employment</li> </ul>			
	X	X	X	
	• Respite Care (in-home) • Respite Care (out-of-home)			
	X	X		X
	<ul style="list-style-type: none"> <li>• Group Home • Individualized Supported Living • Intensive Therapeutic Residential Habilitation • Shared Living: Host Home/Companion</li> </ul>			
	X			
	• Dental • Family Peer Support • Temporary Residential Services			
				X
• Home Delivered Meals				
	X			

# Department of Mental Health (DMH) – Division of Developmental Disabilities

## HCBS Referral and Resource Information

### DD – Home & Community Based Services

#### DD HCBS Services Referral Information

Accessing DD services begins by contacting the local Regional Office/Satellite Office for the County the individual resides in.

- [DD Regional Office Contact Information](#)
- [DD Regional Office Contact Map](#)
- Individuals, family, friends, or natural supports can learn about [Division of DD Services](#) and how to access services.
- [Navigating the DD System](#)

#### DD HCBS Resource Information

- [DD Webpage](#)
- [DD Waivers Manual](#)
- [DD Waiver Fact Sheet](#)
- **DD Email:** [DDmail@dmh.mo.gov](mailto:DDmail@dmh.mo.gov)

### DHSS-DMH Coordination

- [DHSS-DMH Coordination Process](#)
- State Plan Personal Care for Managed Care Program individuals must be authorized through the Managed Care Program. DHSS does not authorize services for managed care individuals. Individuals need to contact the number on their managed care plan card. If the individual has Managed Care coverage, they should refer to the Managed Care provider for services.

### DD – Health Home Resource Information

- [DD Health Home Webpage](#)
- **DD Health Home Email:** [DDhealthhome@dmh.mo.gov](mailto:DDhealthhome@dmh.mo.gov)
- **DD Health Home Phone:** 866-466-8283
- Individuals interested in the DD Health Home program can complete a [self-referral form](#).

### DD – Case Management Resource Information

- [DD Case Management Webpage](#)
- [Targeted Case Management Manual](#)

