Home and Community-Based 1915(c) Waivers for Respite Support and concurrent Managed Care 1915(b) waivers

Medicaid is a program in every state that pays for medical assistance for certain individuals and families with low incomes and resources. It is the largest source of funding for medical and health-related services for America’s poorest people. Because Medicaid is funded jointly by the federal and state governments, the services paid for vary from state to state. In addition to medical services, Medicaid will pay for home and community-based services (HCBS) through the state plan as well as through Medicaid waivers that offer services as a lower-cost alternative to treatment in a medical or long-term care facility, such as a nursing home. Respite usually is paid for through one or more of the following types of waivers: research and demonstration (1115), managed care (1915b) and HCBS (1915c) waiver programs.

Michigan is currently transitioning the Michigan Medicaid program to operate their managed care authority under the 1115 Pathways to Integration demonstration waiver and have moved the following three HCBS waivers to operate concurrently through 1915(c)/1115(a) combination waivers: MI Waiver for Children with Severe Emotional Disorder, MI Children’s Waiver, and MI Habilitation Supports waiver. The complete list of this state’s Medicaid waivers that include respite are:

**MI Choice Waiver**

Provides adult day health, respite, supports coordination, specialized medical equipment and supplies, fiscal intermediary, goods and services, chore, community living supports, community transportation, counseling, environmental accessibility adaptations, home delivered meals, nursing, personal emergency response system, private duty nursing/respiratory care, and training for individuals 65 years and older or between 18-64 diagnosed as physically disabled.

**MI Waiver for Children w/SED**

Provides respite, child therapeutic foster care, community living supports, community transition, family home care training, family support and training, home care training-non-family, therapeutic activities, therapeutic overnight camping, and wraparound for individuals, ages 0-21, diagnosed with a mental illness or a SED (serious emotional disturbance).

**MI Children’s Waiver Program**

Provides respite, enhanced transportation, fiscal intermediary, community living supports, environmental accessibility adaptations and specialized medical equipment and supplies, home care training-family, home care training-non-family, specialty service for individuals and overnight health and safety support, ages 0-17, diagnosed with autism, mental retardation, and developmental disability.

**MI Habilitation Supports**

Provides out-of-home non-vocational habilitation, prevocational services, respite, supported employment, supports coordination, enhanced medical equipment and supplies, enhanced pharmacy, goods and services, community living supports, environmental modifications, family training, Personal Emergency Response System, and private duty nursing for individuals diagnosed with a developmental disability with no age restrictions.

**MI Health Link HCBS**

Provides adult day program, respite, adaptive medical equipment and supplies, fiscal intermediary, assistive technology, chore, environmental modifications, expanded community living supports, home delivered meals, non-medical transportation, Personal Emergency Response System, preventive nursing services, private duty nursing for individuals 65 years and older or between 21-64 diagnosed as physically disabled.
**MI Choice Waiver (0233.R05.01)**
**State Operating Agency: Michigan Department of Health and Human Services, Medical Services Administration (MSA)**

**Description**
The goal of the waiver is to provide home and community based services and supports to participants using a person-centered planning process that allows them to maintain or improve their health, welfare, and quality of life.

Services include: adult day health, respite, supports coordination, specialized medical equipment and supplies, fiscal intermediary, goods and services, chore, community living supports, community transportation, counseling, environmental accessibility adaptations, home delivered meals, nursing, personal emergency response system, private duty nursing/respiratory care, and training.

**Waiver Type**
1915(c) waiver operates concurrently with 1915(b) Managed Care waiver

**Target Population - Eligibility**
Individuals 65 years and older or between the ages of 18-64 diagnosed with physical disabilities.

**Level of Care**
Individuals require level of care available in a nursing facility (NF).

**Respite Services**
Respite services are provided to participants unable to care for themselves and are furnished on a short-term basis due to the absence of, or need of relief for, those individuals normally providing services and supports for the participant. Services may be provided in the participant’s home, in the home of another, or in a Medicaid-certified hospital, a licensed Adult Foster Care or Home for the Aged facility, a Medicaid-certified nursing facility, or another State approved facility.

Respite includes attendant care (participant is not bed-bound), such as companionship, supervision, and assistance with toileting, eating, and ambulation, and basic care (participant may or may not be bed-bound), such as assistance with activities of daily living, a routine exercise regimen, and self-medication.

There is a 30-days-per-calendar-year-limit on respite services provided outside the home. Respite services cannot be scheduled on a daily basis, except for longer-term stays at an out-of-home respite facility. Respite should be used on an intermittent basis to provide scheduled relief of informal caregivers.

Respite services may be participant directed or provider managed.

**Respite Provider Eligibility**
Information for providers: [https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448---,00.html)
Medicaid Provider Help - MSA/MDHHS: 1-800-292-2550

**Caregiver Eligibility**
Respite may be provided by a relative but not a legal guardian or legally responsible person.

**Enrollment Limit**
12800: Year ending 09/30/2023

**How to Apply**
To get services in Michigan, contact the Michigan DHHS General Information line at 517-373-3740. Or, contact the MI Choice Waiver Agency in your community, who can provide you with more information. To identify the waiver agency in your community, see the Waiver Agency Region Map. After finding your region on the map, refer to the List of Waiver Agents by Region. [https://www.michigan.gov/mdhhs/0,5885,7-339-71547_2943_4857_5045-16263--,00.html#map](https://www.michigan.gov/mdhhs/0,5885,7-339-71547_2943_4857_5045-16263--,00.html#map)

**Contact Information**
Michigan DHHS: Phone: 517-373-3740, Medical Services Admin 517-582-4145
Contact your local Area Agency on Aging or the Waiver Agents by Region above.

**Link to Waiver Application**

**Expiration Date**
09/30/2023

**Date of Last Update**
07/17/2019
# Waiver for Children with Serious Emotional Disturbances (SED) (0438.R02.00)

**State Operating Agency:** MDHHS - Behavioral Health and Developmental Disabilities Administration (BHDDA)

## Description

The Children’s Waiver Program (CWP) is transitioning from fee-for-service to managed care. This waiver provides services for children with SED up to the child’s 21st birthday to enable them to continue to live in their home and community. It provides respite, child therapeutic foster care, community living supports, community transition, family home care training, family support and training, home care training-non-family, therapeutic activities, therapeutic overnight camping, and wraparound. The waiver has been limited to thirty-seven counties and twenty-four/five CMHSPs, but if the current renewal application is approved, it will be expanded to serve all counties.

## Waiver Type

1915(c) waiver operates concurrently with Michigan 1115 Pathways to Integration waiver

## Target Population-Eligibility

Individuals, ages 0-21, diagnosed with a mental illness or a SED (serious emotional disturbance). Individual must be under the age of 18 when approved for the waiver. This waiver has only been approved in a limited number of counties and Community Mental Health Service Programs (CMHSPs) found on the Behavioral Health and Developmental Disability website: [https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_80988-427532--,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_80988-427532--,00.html)

## Level of Care

Individuals require level of care available in a hospital – inpatient psychiatric facility.

## Respite Services

Respite services are provided to individuals unable to care for themselves, furnished on a short-term basis because of the absence or need for relief of those persons normally providing the care. Respite care can be provided in the participant’s home or place of residence, a family friend's home in the community or foster home, or an agency contracted with the PIHP. Respite may be family directed or provider managed. [https://www.michigan.gov/documents/A_Family_Guide_to_Respite_139866_7.pdf](https://www.michigan.gov/documents/A_Family_Guide_to_Respite_139866_7.pdf)

## Respite Provider Eligibility

Michigan uses CHAMPS online provider enrollment to enroll Medicaid and Medicaid Waiver Providers. Call (517) 335-5492 for more information. [https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448_78460---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448_78460---,00.html)

## Caregiver Eligibility

Respite may be provided by a relative but not a legal guardian or legally responsible person.

## Enrollment Limit

969: Year ending 9/30/2024

## How to Apply

Application for the SEDW is made through your county Community Mental Health Services Programs (CMHSPs) which you can find here: [https://www.macmhb.org/membership/cmhsp-listings](https://www.macmhb.org/membership/cmhsp-listings). Click the “Download” button next to “CMH Directory.”

## Contact Information

Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Administration, 320 South Walnut Street, Lansing, Michigan 48913
Phone: (517)-373-4700, Customer Service Line: (844)-275-6324 [https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_80988-427532--,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_80988-427532--,00.html)

## Link to Waiver Application


## Expiration Date

09/30/2024,

## Date of Last Update

09/10/2019
**Children’s Waiver Program (4119.R05.00)**

**State Operating Agency:** MDHHS - Behavioral Health and Developmental Disabilities Administration

**Description**

The Children’s Waiver Program (CWP) is transitioning from fee-for-service to managed care. The purpose of the CWP is to provide community-based services to enable children with developmental disabilities, significant needs and meet the CWP eligibility requirements, to live with their parents or legal guardians and to participate in their communities. The objective is to provide regular Medicaid State Plan and waiver services that address the child’s/youth’s identified needs. Waiver services include: Respite; Enhanced Transportation; Community Living Supports; Environmental Accessibility Adaptations and Specialized Medical Equipment and Supplies; Family Support and Training; Home Care Training (Family); Home Care Training (Non-Family); Financial Management Services; Specialty Services (i.e., music, recreation, art and massage therapy) and Overnight Health and Safety Support.

**Waiver Type**

1915(c) – Operates concurrently with the Michigan 1115 Pathway to Integration Waiver.

**Target Population - Eligibility**

Children, ages 0-17, diagnosed with autism, mental retardation, and developmental disability. The child must reside with his birth or legally adoptive parent(s) or with a relative who has been named the legal guardian, provided that the relative is not paid to provide foster care for that child.

**Level of Care**

Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual or Developmental Disabilities (ICF/IID).

**Respite Services**

Respite is provided to participants on a short-term basis because of the need for relief of those persons normally providing care. Respite is to relieve the child’s family from daily stress and care demands. "Short-term" means respite provided during a limited period (e.g., few hours, few days, weekends, or vacations). Respite can be provided in child’s home, licensed family foster home, licensed family group home, licensed children’s camp, licensed respite care facility approved by the State that is not a private residence, or a home of a friend or relative. Nurses may provide respite only in situations where the participant’s medical needs are such that a trained respite aide cannot care for the participant during times where the unpaid caregiver is requesting respite. The maximum monthly respite allocation is 96 hours. In addition to monthly respite, vacation respite can be used up to 14 days per year. Respite services are self-directed or provider managed.

**Respite Provider Eligibility**

Michigan uses CHAMPS online provider enrollment to enroll Medicaid and Medicaid Waiver Providers. Call (517) 335-5492 for more information or visit: https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78460---,00.html

**Caregiver Eligibility**

Respite may be provided by a relative but not a legal guardian or legally responsible person.

**Enrollment Limit**

Year 1 - 469 slots, Year 2-519 slots, Year 3, 4 and 5-569: Year ending 09/30/2024

**How to Apply**

Call the Community Mental Health agency in your county. Current phone numbers can be found at: https://www.macmhb.org/membership/cmhsb-listings. When you call, be prepared to describe your child’s needs, functional limitations, the in-home help and services you are requesting, and your family’s income and resources (including private insurance and Medicaid eligibility).

**Contact Information**

Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Administration, 320 South Walnut Street, Lansing, Michigan 48913
Phone: (517)-373-4700, Customer Service Line: (844)-275-6324

**Link to Waiver Application**


**Expiration Date**

09/30/2024—renewal application submitted and pending

**Date of Last Update**

09/10/2019
Habilitation Supports Waiver (0167.R05.00)
State Operating Agency: MDHHS, Behavioral Health and Development Disabilities Administration (BHDDA)

Description
The goal of the HSW is to enable people with intellectual/developmental disabilities, significant needs and who meet the HSW eligibility requirements to live and participate in their communities. The objective is to provide regular Medicaid State Plan and Additional Services through the §1115 Pathway to Integration and waiver services through the HSW that address the participant’s identified needs. Waiver services include: community living supports (CLS), enhanced medical equipment & supplies, enhanced pharmacy, environmental modifications, family training, fiscal intermediary, goods & services, non-family training, out-of-home non-vocational habilitation, overnight health and safety support, personal emergency response system, prevocational services, private duty nursing, respite care, and supported employment.

Waiver Type
1915(c) operates concurrently with the 1115 Pathway to Integration waiver and the 1115 Healthy Michigan Plan

Target Population
Eligibility
Individuals diagnosed with a developmental disability with no age restrictions.

Level of Care
Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual or Developmental Disabilities (ICF/IID).

Respite Services
Respite care services are provided on a short-term, intermittent basis to relieve the participant’s family or other primary caregiver(s) from daily stress and care demands during times when they are providing unpaid care. "Short-term" means the respite service is provided during a limited period of time (e.g., a few hours, a few days, weekends, or for vacations). “Intermittent” means the respite service does not occur regularly or continuously. The service stops and starts repeatedly or with periods in between.

“Primary” caregivers are typically the same people day after day who provide at least some unpaid supports. “Unpaid” means that respite may only be provided during those portions of the day when no one is being paid to provide the care, i.e., not a time when the participant is receiving a paid State Plan (e.g., home help) or waiver service (e.g., community living supports) or service through other programs (e.g., school). Since adult participants living at home typically receive home help services and hire their family members, respite is not available when the family member is being paid to provide the home help service, but may be available at other times throughout the day when the caregiver is not paid.

Respite is not intended to be provided on a continuous, long-term basis where it is a part of daily services that would enable an unpaid caregiver to work full-time. In those cases, community living supports, or other services of paid support or training staff, should be used. The participant’s record must clearly differentiate respite hours from community living support services.

Respite may be provided in the participants home; home of a friend or relative (not the parent of a minor participant, the spouse of the participant, or the legal guardian); licensed foster care home or respite care facility; licensed camp in community settings accompanied by a respite worker; facility approved by the State that is not a private residence, such as group home or licensed respite care facility.

Respite Provider Eligibility
Michigan uses CHAMPS online provider enrollment to enroll Medicaid and Medicaid Waiver Providers. Call (517) 335-5492 for more information. CHAMPS Provider Enrollment information can be found on the Michigan Department of Health & Human Services website:
https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448_78460---,00.html

Caregiver Eligibility
Respite may be provided by a relative but not by a legal guardian or legally responsible person. Respite care may not be provided by a parent of a minor participant, the spouse of the participant, or the primary unpaid caregiver.

Enrollment Limit
8268: Year ending 09/30/2024

Medicaid Waivers for Respite Support – 2019
ARCH National Respite Network and Resource Center | archrespite.org
**How to Apply**
Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Administration, 320 South Walnut Street, Lansing, Michigan 48913
Phone: (517)-373-4700, Customer Service Line: (844)-275-6324
Community Mental Health Services Programs for each county help screen individuals who may be eligible and will assist those individual with the application process. The Michigan Department of Community Health reviews and scores the application and determines who receives priority for this program.
https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78448_78460---,00.html

**Contact Information**
To apply, contact the number listed for your county found on the Behavioral Health and Developmental Disability website: http://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4899-178824-00.html

**Link to Waiver Application**

**Expiration Date**
09/30/2024-renewal application submitted and pending.

**Date of Last Update**
09/10/2019
MI Health Link HCBS Waiver (1126.R00.03)
State Operating Agency: MDHHS, Bureau of Medicaid Long-term Care Services and Supports

**Description**
MI Health Link HCBS is a program that coordinates supports and services for individuals who are dually eligible for both Medicare and Medicaid programs based on age or disability and reside in any one of the four specified regions. The goal is to provide home and community based supports and services to participants using a person-centered planning process that allows them to maintain or improve their health, welfare, and quality of life. Participants enrolled in the MI Health Link HCBS waiver may not be enrolled simultaneously in another of Michigan’s 1915(c) home and community based services waivers.

This waiver provides adult day program, respite, adaptive medical equipment and supplies, fiscal intermediary, assistive technology, chore, environmental modifications, expanded community living supports, home delivered meals, non-medical transportation, Personal Emergency Response System, preventive nursing services, and private duty nursing.

**Waiver Type**
1915(c) operates concurrently with the 1915(b) mandatory managed care authority called MI Health Link HCBS.

**Target Population-Eligibility**
Individuals who are dually eligible for Medicare and Medicaid that includes those who are 65 years and older or between ages 21 - 64 diagnosed with physical disabilities. Individuals must live in one of the following 4 regions: Region 1 (Upper Peninsula) – Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft Counties; Region 4 (Southwest) – Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, Van Buren Counties; Region 7 (Wayne) – Wayne County; Region 9 (Macomb) – Macomb County.

**Level of Care**
Individuals require level of care available in a nursing facility (NF).

**Respite Services**
Respite is provided on a short-term, intermittent basis to relieve the family or other primary caregiver from daily stress and care demands during times when providing unpaid care. It is not intended to be provided on a continuous, long-term basis where it is a part of daily services that would enable an unpaid caregiver to work elsewhere full time. Respite services may be provided in the enrollee’s home, home of another, licensed Adult Foster Care or Home for the Aged facility, Medicaid certified nursing facilities, or other State-approved facilities.

The enrollee may not choose to have respite provided in the home of another person unless he or she is participating in an arrangement that supports self-determination. Respite services cannot be scheduled on a daily basis except in situations that involve the regular unpaid caregiver’s absence/vacation, or if the respite is provided in a facility on a temporary basis. Respite services shall not be provided by the enrollee’s usual caregiver who provides other waiver services to the enrollee. Respite may be participant-directed or provider managed.

**Respite Provider Eligibility**
Information for providers: [https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_64077-335615--.00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_64077-335615--.00.html)

**Caregiver Eligibility**
Respite may be provided by a relative but not a legal guardian or legally responsible person.

**Enrollment Limit**
4700: Year ending 12/31/2019

**How to Apply**
Call Michigan ENROLLS toll-free at 1-800-975-7630 to enroll (TTY: 1-888-263-5897)

**Contact Information**
Call Michigan ENROLLS, email [IntegratedCare@michigan.gov](mailto:IntegratedCare@michigan.gov), or visit: [www.Michigan.gov/MIHealthLink](http://www.michigan.gov/MIHealthLink)

**Link to Waiver Application**

**Expiration Date**
12/31/2019, with plans to renew

**Date of Last Update**
07/17/2019

Medicaid Waivers for Respite Support – 2019
ARCH National Respite Network and Resource Center | archrespite.org